# **B1** (Official Form 1) (01/08)

| United States Bankruptcy Court<br>Eastern District of Virginia, Alexandria Di  |  |   |   | ivision   |  |  |                   |   | ng formered kroeds<br>Lean and a Society of |                                     |                          |
|--|--|---|---|---|--|--|-------------------|---|---|-------------------------------------|--------------------------|
| Name of Debtor (if individual, enter Last, First, Middle):   |  |   |   |   | Name of Joint Debtor (Spouse) (Last, First, Middle):   |  |                   |   |   |                                     |                          |
| Grady, Christopher   |  |   |   |   |  |  |                   |   |   |                                     |                          |
| All Other Names Used by the Debtor in the last 8 years (include married, maiden, and trade names):   |  |   |   | All Other Names Used by the Idm Dathor in the last 8 years (include married, maiden, and trade names):  |  |  |                   |   |   |                                     |                          |
| Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN) No./Complete EIN (if more than one, state all): 7653  |  |   |   |   | Last four digits of Soc. Sec. or Individual-Taxpares, I.D. TTIN 300./Complete EIN (if more than one, state all III) AN |  |                   |   |   |                                     |                          |
| Street Address of Debtor (No. and Street, City, and State):  |  |   |   |   | Street Address of Joint Debtor (No. and Street, City, and State):  |  |                   |   |   |                                     |                          |
| 22055 Avonworth Square   |  |   | CL'ERK US BANKRUPTCY COURT ALEXANDRIA DIVISION  |   |  |  |                   |   |   |                                     |                          |
| Ashburn, VA  |  |   |   | 20148   |  |  |                   |   |   |                                     |                          |
| Loudoun  | dence or of the Pri  | ncipal Place of Busi                                      | ness:   |   |  | County of Res  | idence o          | or of the Principal   | Place of Busines                            | \$:<br>                             | ·                        |
| Mailing Addres   | is of Debtor (if diff  | ferent from street ad                                     | dress):   |   |  | Mailing Addre  | ess of Jo         | oint Debtor (if diffe   | erent from street a                         | address):                           |                          |
|  |  |   |   |   |  |  |                   |   |   |                                     |                          |
| Location of Prin   | ncipal Assets of Bu  | usiness Debtor (if di                                     | fferent from stre   | et address abo  | ove):  |  |                   |   |   |                                     |                          |
|  | Type of Debtor   |   |   | Nature of :<br>(Check or  |  |  |                   |   | Bankruptcy Co                               |                                     |                          |
| ☐ Individual See Exhib Corporatio Partnership Other (If d  | (Check one box<br>(includes Joint Del<br>pit D on page 2 of the<br>on (includes LLC and<br>plebtor is not one of | t.)  abtors)  this form.  and LLP)  f the above entities, | (Check one box.)  Health Care Business Single Asset Real Estate as defired to the state as defired to |   | nte as defin   | ed in  |                   | Chapter 9 Recognition of a Foreign Chapter 11 Main Proceeding Chapter 12 Chapter 15 Petition for                  |   | 'n                                  |                          |
| CHECK IIIIS  | box and state type   | or entity below.)   | Other   | 2,111   |  |  |                   | •   | Nature of                                   |                                     |                          |
|  |  |   | Debtor is under Tit   | Tax-Exem<br>(Check box, if<br>s a tax-exempt<br>tle 26 of the U   | f applicable<br>t organizat<br>Inited State  | ion<br>es  | - ⊠               | Debts are primar<br>debts, defined in<br>§ 101(8) as "incuindividual primar<br>personal, family,<br>hold purpose. | 11 U.S.C.<br>ared by an<br>rily for a       | _ `                                 | re primarily<br>s debts. |
|  | Filing Fee   | e (Check one box.)  |   |   |  |  | _ <u></u>         |   | 11 Debtors                                  |                                     | <del>_</del>             |
| Filing Fee (Check one box.)  Full Filing Fee attached  Filing Fee to be paid in installments (Applicable to individuals only)  Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  Filing Fee waiver requested (Applicable to chapter 7 individuals only). Must attach |  |   |   | Debtor: Check if: Debtor's  | s a smal<br>s not a s<br>aggrega<br>or affili  | all business debtor<br>small business deb<br>sate noncontingent<br>liates) are less than | tor as defined in | 11 U.S.C. §   | 101(51D)                                    |                                     |                          |
| signed application for the court's consideration. See Official Form 3B.  |  |   |   | Check all applicable boxes:  A plan is being filed with this petition.  Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b). |  |  | nore classes      |   |   |                                     |                          |
| Statistical/Administrative Information  ☐ Debtor estimates that funds will be available for distribution to unsecured creditors.  ☐ Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.   |  |   |   | ve  |  |  |                   |   |   | THIS SPACE IS FOR<br>COURT USE ONLY |                          |
|  | mber of Creditors  |   |   |   |  |  |                   |   | _   |                                     | •                        |
| <b>⊠</b><br>1-<br>49   | 50-<br>99  |   | 00- 1   | □<br>1,000-<br>5,000  | 5,001-<br>10,000   | 10,001<br>25,000   |                   | 25,001-<br>50,000   | 50,001-<br>100,000                          | Over<br>100,000                     |                          |
| Estimated Ass  \$0 to \$50,000   | \$50,001 to<br>\$100,000   | \$500,000 to  | 500,001 \$<br>0 \$1 to  | ]<br>\$1,000,001<br>to \$10<br>million  | \$10,000<br>to \$50<br>million   | 0,001 \$50,00<br>to \$10<br>millior  | 0                 | \$100,000,001<br>to \$500<br>million  | \$500,000,001<br>to \$1 billion             | More than<br>\$1 billion            |                          |
| Estimated Liab   | bilities   |   | م ر<br>ا  |   |  |  |                   |   |   |                                     |                          |
| \$0 to<br>\$50,000   | \$50,001 to<br>\$100,000   | \$100,001 to \$3<br>\$500,000 to                          | 500,001 \$<br>5\$1 to   | <br>\$1,000,001<br>to \$10<br>million   | \$10,000<br>to \$50<br>million   |  | 0                 | \$100,000,001<br>to \$500<br>million  | \$500,000,001<br>to \$1 billion             | More than<br>\$1 billion            |                          |

| (This page must be completed and filed in every case)  All Proceedings of the State |  |                               |  |
|--|--|-------------------------------|--|
| Location Cose N  |  |                               |  |
|  | umber:<br>68-DSP-04/00   | Date Filed:<br>1/7/00         |  |
| Location Case N  |  | Date Filed:                   |  |
| Where Filed:   |  |                               |  |
| Name of Debtor: Case N   |  | Date Filed:                   |  |
| Name of Debroi.  | umber.   | Date Pagu.                    |  |
| District: Relation   | nship:   | Judge:                        |  |
| relief under chapter 11.) have i   | Exhibit B  (To be completed if debtor is an individual whose debts are primarily consumer debts.)  I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I delivered to the |                               |  |
| Exhibit A is attached and made a part of this petition.  | r the notice required by 11 U.S.C.   | . \$ 5-2(0).                  |  |
| X  | Signature of Attorney  | Date                          |  |
| Exhibit C  Does the debtor own or have possession of any property that poses or is alleged to pose a threat of this petition.  Yes, and Exhibit C is attached and made a part of this petition.  No  | of imminent and identifiable harm  | o to public health or safety? |  |
| Exhibit D  (To be completed by every individual debtor. If a joint petition is filed, each spouse must completed. Exhibit D completed and signed by the debtor is attached and made a part of this petition.  If this is a joint petition:  Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition.  | -  | ).)                           |  |
| Information Regarding the  | Debtor - Venue   |                               |  |
| (Check any applicable box.)  |  |                               |  |
| Debtor has been domiciled or has had a residence, principal place of business, or principal preceding the date of this petition or for a longer part of such 180 days than in any other  | -  | days immediately              |  |
| ☐ There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership  |  |                               |  |
|  |  |                               |  |
| Debtor is a debtor in a foreign proceeding and has its principal place of business or principal place of business or assets in the United States but is a defendant in this District, or the interests of the parties will be served in regard to the relief sought in   | an action or proceeding [in a fed  |                               |  |
| Certification by a Debtor Who Resides as a   | Tenant of Residential Propert  | y                             |  |
| (Check all applicable  |  |                               |  |
| ☐ Landlord has a judgment against the debtor for possession of debtor's residence. (If box   | x checked, complete the following  | g.)                           |  |
| (Name of lar   | ndlord that obtained judgment)   |                               |  |
| (Address of  | landlord)  |                               |  |
| Debtor claims that under applicable nonbankruptcy law, there are circumstances under entire monetary default that gave rise to the judgment for possession, after the judgeme  |  |                               |  |
| Debtor has included in this petition the deposit with the court of any rent that would be  | come due during the 30-day perio   | od after the                  |  |
| filing of the petition.  Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(1)).   |  |                               |  |

| Voluntary Petition  | Name of Debtor(s): Grady, Christopher   |
|---|---|
| (This page must be completed and filed in every case)   |   |
|   |   |
| Signature(s) of Debtor(s) (Individual/Joint)  | Signature of a Foreign Representative   |
| I declare under penalty of perjury that the information provided in this petition is true and correct.  [If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under Chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.  [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by § 342(b) of the Bankruptcy Code.  I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. | I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.  (Check only one box.)  I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by § 1515 of title 11 are attached.  Pursuant to § 1511 of title 11, United States Code, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached. |
| Signature of Debtor X   | (Signature of Foreign Representative)   |
| Signature of Joint Debtor  (703) 724 – 9774  Telephone Number (If not represented by attorney)  1 9 0 9   | (Printed Name of Foreign Representative)  Date  |
| Date  | Charles of No. 444  |
| Signature of Attorney*  | Signature of Non-Attorney Bankruptcy Petition Preparer  I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer  |
| Signature of Attorney  Printed Name of Attorney for Debtor(s)  Firm Name  Address   | as defined in 11 U.S.C. 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notice and information required under 11 U.S.C. 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19B is attached.  LawyerAlternative.llc.                                    |
|   | Printed Name and title, if any, of Bankruptcy Petition Preparer<br>548-83-9605  |
| Telephone Number  | Social Security number (If the bankruptcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)   |
| Date  * In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.  | 195 W. Young Street Address Morgan UT 84050   |
| Signature of Debtor (Corporation/Partnership)   | X /s/ J. Christian Barlow   |
| I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.  The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.   | O7 January 2009  Date  Signature of Bankruptcy Petition Preparer or officer, principal, responsible person, or partner whose social security number is provided above.  |
| Signature of Authorized Individual  | Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition: preparer is not an individual.   |
| Printed Name of Authorized Individual   | If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.   |
| Title of Authorized Individual  | A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result   |
| Date  | in fines or imprisionment or both 11 U.S.C. § 110; 18 U.S.C. § 156.   |

# UNITED STATES BANKRUPTCY COURT

# Eastern District of Virginia, Alexandria Division

| In Re: | Grady, Christopher  | Case No.  |                                    |  |  |  |
|--------|---|---|------------------------------------|--|--|--|
|        | Debtor  | (if know  | n)                                 |  |  |  |
|        | EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT  |   |                                    |  |  |  |
|        | credit counseling listed below. If you ca<br>case, and the court can dismiss any cas<br>filing fee you paid, and your creditors<br>you. If your case is dismissed and you f       | neck truthfully one of the five statements reg<br>annot do so, you are not eligible to file a bank<br>e you do file. If that happens, you will lose w<br>will be able to resume collection activities ag<br>file another bankruptcy case later, you may<br>you may have to take extra steps to stop cre | kruptcy<br>vhatever<br>ainst<br>be |  |  |  |
|        |   | his Exhibit D. If a joint petition is filed, each sp. D. Check one of the five statements below and   |                                    |  |  |  |
|        | from a credit counseling agency approved<br>administrator that outlined the opportunit<br>performing a related budget analysis, and   | g of my bankruptcy case, I received a briefing I by the United States trustee or bankruptcy ies for available credit counseling and assisted I have a certificate from the agency describing the certificate and a copy of any debt repayment.  | g the                              |  |  |  |
|        | from a credit counseling agency approved<br>administrator that outlined the opportunit<br>performing a related budget analysis, but<br>the services provided to me. You must file | g of my bankruptcy case, I received a briefing I by the United States trustee or bankruptcy ies for available credit counseling and assisted I do not have a certificate from the agency descript debt repayment plan developed through the act of the case is filed.                                   | cribing<br>ibing the               |  |  |  |

| 3. I certify that I requested credit counseling services from an approved agency but was mable to obtain the services during the five days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement to I can file my bankruptcy case now. [Must be accompanied by a motion for determination by the court.][Summarize exigent circumstances here.]   |
|--|
| If the court is satisfied with the reasons stated in your motion, it will send you an order approving your request. You must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy case and promptly file a certificate from the agency that provided the briefing, together with a copy of any debt management plan developed through the agency. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. A motion for extension must be filed within the 30-day period. Failure to fulfill these requirements may result in dismissal of your case. If the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing, your case may be dismissed. |
| 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.][Must be accompanied by a motion for determination by the court.]  |
| Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);  |
| Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);  |
| Active military duty in a military combat zone.  |
| 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.  |
| certify under penalty of perjury that the information provided above is true and   |

Signature of Debtor
Date: 1/08/09

# UNITED STATES BANKRUPTCY COURT FOR THE EASTERN DISTRICT OF VIRGINIA

| Inre Grady, Cl   | nristopher  | Case No7  |   |
|--|---|---|---|
|  | Debtor(s)   |   |   |
|  | DECLARATION OF  | DIVISIONAL VENUE  |   |
|  | e, principal place of business or princ<br>tion in the indicated city or county [c  |   | eater part of the 180 days preceding            |
| ALEXANDRIA DIVISION Cities:  Alexandria-510  | RICHMOND DIVISION Cities:  City)-760  | NORFOLK DIVISION Cities:  Norfolk-710   | NEWPORT NEWS DIVISION Cities:  Newport News-700 |
| Fairfax-600 Falls Church-610 Manassas-683 Manassas Park-685 Counties: Arlington-013 Fairfax-059 Fauquier-061 Loudoun-107 Prince William-153 Stafford-179 | Colonial Heights-570 Emporia-595 Fredericksburg-630 Hopewell-670 Petersburg-730  Counties: Amelia-007 Brunswick-025 Caroline-033 Charles City-036 Chesterfield-041 Dinwiddie-053 Essex-057 Goochland-075 Greensville-081 Hanover-085 Henrico-087 King and Queen-097 King George-099 King William-101 Lancaster-103 Lunenburg-111 Mecklenburg-117 Middlesex-119 New Kent-127 Northumberland-133 Nottoway-135 Powhatan-145 Prince George-149 Richmond(county)-159 Spotsylvania-177 Surry-181 Sussex-183 | Cape Charles-535 Chesapeake-550 Franklin-620 Portsmouth-740 Suffolk-800 Virginia Beach-810 Counties: Accomack-001 Isle of Wight-093 Northampton-131 Southampton-175 | Pro Se Debtor                                   |
| There is a bankruptcy case general partner, or partners  | Westmoreland-193 concerning debtor's affiliate, hip pending in this Division.   | Signature of Joint Debtor debtors are not represented to  |   |

# UNITED STATES BANKRUPTCY COURT

# Eastern District of Virginia, Alexandria Division

| In Re: | Grady, Christopher | Case No. |        |
|--------|--------------------|----------|--------|
|        | Debtor             | (if      | known) |
|        |                    | Chapter  | 7      |

# **SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE                                      | ATTACHED<br>(YES/NO) | NO. OF SHEETS | ASSETS       | LIABILITIES  | OTHER      |
|---|----------------------|---------------|--------------|--------------|------------|
| A - Real Property                                     | Yes                  | 1             | \$390,000.00 |              |            |
| B - Personal Property                                 | Yes                  | 5             | \$29,253.00  |              |            |
| C - Property Claimed<br>as Exempt                     | Yes                  | 1             |              |              |            |
| D - Creditors Holding<br>Secured Claims               | Yes                  | 1             |              | \$513,132.00 |            |
| E - Creditors Holding Unsecured<br>Priority Claims    | Yes                  | 4             |              | \$34,088.00  |            |
| F - Creditors Holding Unsecured<br>Nonpriority Claims | Yes                  | 3             |              | \$60,557.14  |            |
| G - Executory Contracts and<br>Unexpired Leases       | Yes                  | 1             |              |              |            |
| H - Codebtors   | Yes                  | 1             |              |              |            |
| I - Current Income of<br>Individual Debtor(s)         | Yes                  | 1             |              |              | \$5,882.50 |
| J - Current Expenditures of<br>Individual Debtor(s)   | Yes                  | 1             |              |              | \$7,089.00 |
|   | TOTAL                | 19            | \$419,253.00 | \$607777.14  | <u> </u>   |

# UNITED STATES BANKRUPTCY COURT

# Eastern District of Virginia, Alexandria Division

| In Re:   | Grady, Christopher  | Case No.                             |                                  |
|----------|---|--------------------------------------|----------------------------------|
|          | Debtor  |                                      | (if known)                       |
|          |   | Chapter                              | 7                                |
|          | STATISTICAL SUMMARY OF CERTAIN  | I LIABILITIES AND REL                | ATED DATA (28 U.S.C. § 159)      |
|          | you are an individual debtor whose debts are primarily consumer )), filing a case under chapter 7, 11 or 13, you must report all info | ,                                    | unkruptcy Code (11 U.S.C.        |
| informa  | Check this box if you are an individual debtor whose debts a tion here.   | re NOT primarily consumer debts. You | a are not required to report any |
| This inf | formation is for statistical purposes only under 28 U.S.C. § 15   | ).                                   |                                  |
| Summa    | rize the following types of liabilities, as reported in the Schedi  | iles, and total them.                |                                  |

| Type of Liability  | Amount   |
|--|----------|
| Domestic Support Obligations (from Schedule E)   | 23088.0  |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)(whether disputed or undisputed) | 11000.00 |
| Claims for Death or Personal Injury While Debtor Was<br>Intoxicated (from Schedule E)                      |          |
| Student Loan Obligations (from Schedule F)   |          |
| Domestic Support, Separation Agreement, and Divorce Decree<br>Obligations Not Reported on Schedule E       |          |
| Obligations to Pension or Profit-Sharing, and Other Similar<br>Obligations (from Schedule F)               |          |
| To   | OTAL     |

#### State the following:

| Average Income (from Schedule I, Line 16)               | 5,882.50 |
|---|----------|
| Average Expenses (from Schedule J, Line 18)             | 7,089.00 |
| Current Monthly Income (from Form 22A Line 12; OR, Form |          |
| 22B Line 11; OR, Form 22C Line 20)                      | 7,631.00 |

#### State the following:

| State the following.  |              |
|---|--------------|
| 1. Total from Schedule D, "UNSECURED PORTION, IF<br>ANY" COLUMN             | \$116,132.00 |
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.             | \$34,088.00  |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column. | 0.00         |
| 4. Total from Schedule F  | \$60,557.14  |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4)                | \$176689.14  |

|                          |                    | Document                              | Page 9 of 62 |            |
|--------------------------|--------------------|---------------------------------------|--------------|------------|
| Official Form 6A (12/07) |                    |                                       |              |            |
| In Re:                   | Grady, Christopher | · · · · · · · · · · · · · · · · · · · | Case No.     |            |
|                          | Debtor             |                                       |              | (if known) |

### **SCHEDULE A - REAL PROPERTY**

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, or both own the property by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint or Community". If the debtor holds no interest in real property, write "None" under "Description and Location of Property".

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim".

If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Description and Location of Property    | Nature of Debtor's<br>Interest in Property | Husband, Wife, Joint, or Community |              | Amount of<br>Secured Claim |
|---|--|------------------------------------|--------------|----------------------------|
| 22055 Avonworth SQ<br>Ashburn, VA 20148 | Fee simple                                 | Н                                  | \$390,000.00 | \$477,212.00               |
|   |  |                                    |              |                            |
|   |  |                                    |              |                            |
|   |  |                                    |              |                            |
|   |  |                                    |              |                            |
|   |  |                                    |              |                            |
|   |  |                                    |              |                            |

\$390,000.00

|                          | Debtor             |          |               | (if known) |
|--------------------------|--------------------|----------|---------------|------------|
| In Re:                   | Grady, Christopher |          | Case No.      |            |
| Official Form 6B (12/07) |                    |          |               |            |
|                          |                    | Document | Page 10 of 62 |            |

#### **SCHEDULE B - PERSONAL PROPERTY**

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "X" in the appropriate position in the column labeled "None". If additional space is needed in any category, attach a separate sheet properly identified with the same case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, or both own the property by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint or Community". If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state the person's name and address under "Description and Location of Property". If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

| 74.5., white only, by John 1500, guardian. 150 not di  | "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 100/(m). |   |                                    |   |  |  |
|--|---|---|------------------------------------|---|--|--|
| Type of Property   | None  | Description and Location of Property                          | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption |  |  |
| 1. Cash on hand.   | Х   |   | Н                                  |   |  |  |
| 2. Checking, savings or other financial accounts, CD's, or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses or cooperatives. |   | Checking-Bank of America(\$203.00)<br>401K-Fidelity (3990.00) | Н                                  | 4103.00   |  |  |
| 3. Security deposits with public utilities, telephone companies, landlords, and others.  | X   |   |                                    |   |  |  |
| 4. Household goods and furnishings, including audio, video, and computer equipment.  |   | Furnishings, Appliances, Electronics, Computers               | Н                                  | 2900.00   |  |  |

|            |      |    |      | ı |
|------------|------|----|------|---|
| Document   | Page | 11 | Ot 6 | 1 |
| DUCUITIEIL | rauc |    | UI U | 4 |

| In Re: Grady, Christopher  |      | Case No                              |                                    |   |
|--|------|--------------------------------------|------------------------------------|---|
| Debtor   |      |                                      | (i                                 | f known)  |
| Type of Property   | None | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption |
| 5. Books, pictures and other art objects,  | Х    | ,                                    |                                    |   |
| antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles.  | , A  |                                      |                                    |   |
| 6. Wearing apparel.  | X    |                                      |                                    |   |
| 7. Furs and jewelry.   | X    |                                      |                                    |   |
| 8. Firearms and sports, photographic, and other hobby equipment.   |      | Guns Debtors residence               | Н                                  | 100.00  |
| 9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.   | х    |                                      |                                    |   |
| 10. Annuities. Itemize and name each issuer.   | x    |                                      |                                    |   |
| 11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. | х    |                                      |                                    |   |
| 12. Interest in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.   | х    |                                      |                                    |   |

| $\overline{}$              | ocument | Page  | • | 17 | $\overline{}$ | ~          |
|----------------------------|---------|-------|---|----|---------------|------------|
|                            |         | Pane  | _ |    | 7 11          | n          |
| $\boldsymbol{\mathcal{L}}$ | ocumen  | ı auc | • |    | OI.           | <b>U</b> 2 |

| In Re: Grady, Christopher   |      | Case No.                             |                                    |   |
|---|------|--------------------------------------|------------------------------------|---|
| Debtor  |      |                                      | (i                                 | f known)  |
| Type of Property  | None | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption |
| 13. Stock and interests in incorporated and   | Х    |                                      |                                    | <u> </u>  |
| unincorporated businesses. Itemize.  14. Interests in partnerships or joint ventures. Itemize.  | x    |                                      |                                    |   |
| 15. Government and corporate bonds and other negotiable and non-negotiable instruments.   | х    |                                      |                                    |   |
| 16. Accounts receivable.  | х    |                                      |                                    |   |
| 17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.  | х    |                                      |                                    |   |
| 18. Other liquidated debts owing debtor including tax refunds. Give particulars.  | X    |                                      |                                    |   |
| 19. Equitable or future interest, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | х    |                                      |                                    |   |
| 20. Contingent and noncontingent interests in real estate of a decendent, death benefit plan, life insurance policy, or trust.  | X    |                                      |                                    |   |

| Docur         | nont   | Page  | 1 つ | <b>∽</b> + | C          |
|---------------|--------|-------|-----|------------|------------|
| 1 1/ 1/ 1/ 1/ | 114111 | Pane  | 1 < | (1)        | n          |
| Docui         | HOHL   | i auc |     | OI.        | <b>U</b> 2 |

| In Re: Grady, Christopher  |      | Case No                                 |                                    |   |
|--|------|---|------------------------------------|---|
| Debtor   |      |   | (i                                 | f known)  |
| Type of Property   | None | Description and Location of Property    | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption |
| 21. Other contingent or unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.  | Х    |   |                                    |   |
| 22. Patents, copyrights, and other intellectual property. Give particulars.  | x    |   |                                    |   |
| 23. Licenses, franchises, and other general intangibles. Give particulars.   | х    |   |                                    |   |
| 24. Customer lists or other compilations containing personally identifiable information provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | х    |   |                                    |   |
| 25. Automobiles, trucks, trailers, and other vehicles and accessories.   |      | 2005 Nissan Armada<br>Debtors Residence | Н                                  | 22,000.00   |
| 26. Boats, motors, and accessories.  | X    |   |                                    |   |
| 27. Aircraft and accessories.  | X    |   |                                    |   |
| 28. Office equipment, furnishings, and supplies.   |      | Machinery and Equipment                 | Н                                  | 150.00  |

Document Page 14 of 62

| In Re: Grady, Christopher  |           | Case No                              |                                    |   |
|--|-----------|--------------------------------------|------------------------------------|---|
| Debtor   |           |                                      | (i                                 | f known)  |
| Type of Property 29. Machinery, fixtures, equipment, and             | None<br>X | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property Without Deducting Any Secured Claim or Exemption |
| supplies used in business.   |           |                                      |                                    |   |
| 30. Inventory.   | Х         |                                      |                                    |   |
| 31. Animals.   | Х         |                                      |                                    |   |
| 32. Crops - growing or harvested. Give particulars.                  | х         |                                      |                                    |   |
| 33. Farming equipment and implements.                                | Х         |                                      |                                    |   |
| 34. Farm supplies, chemicals, and feed.                              | Х         |                                      |                                    |   |
| 35. Other personal property of any kind not already listed. Itemize. | Х         |                                      |                                    |   |
|  |           | Total                                |                                    | \$25,353,00   |

|                    | Document | Page 15 of 6 | <i>J</i> |  |
|--------------------|----------|--------------|----------|--|
| Gτady, Christopher |          | Case No.     |          |  |

(if known)

# SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

| Debtor claims the exemptions to which debtor is entitled under:<br>(Check one box) | Check if debtor claims a homestead exemption that exceeds \$136,875. |
|--|--|
| ☐ 11 U.S.C. § 522(b)(2) ☑ 11 U.S.C. § 522(b)(3)                                    |  |

Official Form 6C (12/07)
In Re:

Debtor

| Description of Property                                       | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of<br>Property Without<br>Deducting Exemption |
|---|--------------------------------------|----------------------------|---|
| Checking-Bank of America(\$203.00)<br>401K-Fidelity (3990.00) | 34-13                                | 4103.00                    | 4103.00   |
| Furnishings, Appliances, Electronics, Computers               | 34-26(4a)                            | 2,900.00                   | 2900.00   |
| Guns<br>Debtors residence                                     | 34-13                                | 100.00                     | 100.00  |
| Machinery and Equipment                                       | 34-13                                | 150.00                     | 150.00  |
|   |                                      |                            |   |
|   |                                      |                            |   |
|   |                                      |                            |   |
|   |                                      |                            |   |

|                          | Debtor             |          |               | (if known) |
|--------------------------|--------------------|----------|---------------|------------|
| n Re:                    | Grady, Christopher |          | Case No.      |            |
| Official Form 6D (12/07) |                    |          |               |            |
|                          |                    | Document | Page 16 of 62 |            |

#### SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of the filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Amount of Claim Without Deducting Value of Collateral" also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion, if Any" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D. Joint Husband, Wife, Unliquidated Date Claim was Incurred, Amount of Disputed Nature of Lien, and Description Claim Without Creditor's Name and Mailing Address and Value of Property Deducting Unsecured Subject to Lien Value of Collateral Portion, If Any Including Zip Code Account Number: 0656765023 X н August 2007 457,187.00 82,187.00 First Mortgage **GMAC** PO Box 4622 Waterloo IA 50704 VALUE \$ 375,000.00 Account Number: 845000XXXX X H December 2008 20,025.00 20,025.00 Second Mortgage GMAC PO Box 4622 Waterloo IA 50704 VALUE\$ 375,000.00 Account Number: 50237410799-91-9001 H 13,920,00 35920.00 March 2008 **PMSI** Wells Fargo Auto Finance 2005 Nissan Armada PO Box 29704 Phoenix AZ 85038 VALUE \$ 22,000.00 Subtotal \$513,132.00 \$116,132.00 (Total of this page)

> (Report also on Summary of Schedules.)

\$513,132.00

Total

(Use only on last page)

(If applicable, report also on Statistical Summary of Certain Liabilities and Related Data.)

\$116,132.00

| Form 6E (12/07) | _           |          |            |
|-----------------|-------------|----------|------------|
| Grady,          | Christopher | Case No. |            |
|                 | Debtor      | -        | (if known) |

Page 17 of 62

#### SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entitires holding priority claims against the debtor or the property of the debtor, as of the date of the filing of this petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

Document

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts who file a case under chapter 7 or 13 report this total also on the Statistical Summary of Certain Liabilities and Related

| Data.  |
|--|
| Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtor with primarily conusmer debts who file a case under chapter 7 report this total also on the Statistical Summary of Certain Liabilities and Related Data. |
| Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.  |
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets)  |
| <b>⊠</b> Domestic Support Obligations  |
| Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).  |
| ☐ Extensions of credit in an involuntary case  |
| Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).  |
|  |

☐ Wages, salaries, and commissions

Official In Re:

> Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$10,950\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occured first, to the extend provided in 11 U.S.C. § 507(a)(4).

Contributions to employee benefit plans

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

|                                     | Docum  | ent Page 10 01 02   |  |
|-------------------------------------|--|---|--|
| Official Form 6E                    | (12/07)  |   |  |
| în Re:                              | Grady, Christopher   | Case No.  |  |
|                                     | Debtor   | (if known)  |  |
|                                     |  |   |  |
|                                     |  |   |  |
|                                     |  |   |  |
|                                     |  |   |  |
| _                                   |  |   |  |
| Certain                             | farmers and fishermen  |   |  |
| Claims of certain                   | in farmers and fishermen, up to \$5,400* per farmer  | of fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).       |  |
| ☐ Deposits                          | by individuals   |   |  |
| Claims of indiv                     | iduals up to \$2,425* deposits for the purchase, leas  | se, or rental of property or services for personal, family, or household use, |  |
| that were not de                    | elivered or provided. 11 U.S.C. § 507(a)(7).   |   |  |
| Taxes ar                            | nd Certain Other Debts Owed to Governme  | ntal Units  |  |
| Taxes, customs                      | duties, and penalties owing to federal, state, and lo  | cal governmental units as set forth in 11 U.S.C. § 507(a)(8).                 |  |
| Commit                              | ments to Maintain the Capital of an Insured  | d Depository Institution  |  |
|                                     |  | Office of Thrift Supervision, Comptroller of the Currency, or Board of        |  |
| Governors of th<br>U.S.C. § 507(a)  |  | successors, to maintain the capital of an insured depository institution. 11  |  |
| _                                   |  |   |  |
|                                     | or Death or Personal Injury While Debtor   |   |  |
|                                     | h or personal injury resulting from the operation of or another substance. 11 U.S.C. § 507(a)(10). | a motor vehicle or vessel while the debtor was intoxicated from using         |  |
| • • • • • • • • • • • • • • • • • • |  |   |  |
|                                     |  |   |  |
|                                     |  |   |  |
| * Amounts are s                     | subject to adjustment on April 1, 2010, and every th   | aree years thereafter with respect to cases commenced on or after the date of |  |

adjustment.

Case No.

In Re: Grady, Christopher

| Debtor  |                  |                                    |   |                 |                         |          | (if kr                | iown)                             |  |
|---|------------------|------------------------------------|---|-----------------|-------------------------|----------|-----------------------|-----------------------------------|--|
|   | Domestic Suppor  |                                    |   |                 |                         |          | π                     |                                   |  |
|   | Type of Priority |                                    |   |                 |                         |          | <u> </u>              |                                   |  |
| Creditor's Name and Mailing Address Including Zip Code  | Codebtor         | Husband, Wife, Joint, or Community | Date Claim was Incurred, and Consideration for Claim  | Contingent      | Unliquidated            | Disputed | Total Amount of Claim | Amount<br>Entitled<br>to Priority | Amount Not<br>Entitled to<br>Priority, If<br>Any |
| Account Number: Riggio Grady 22567 Armstrong Terrace #312 Ashburn, VA 20147   |                  | Н                                  | 2008<br>Child Support   |                 |                         |          | 23088.00              | 23088.00                          | 0.00   |
| Account Number:   |                  |                                    |   |                 |                         |          |                       |                                   |  |
| Account Number:   |                  |                                    |   |                 |                         |          |                       |                                   |  |
| _Account Number:  |                  |                                    |   |                 |                         |          |                       |                                   |  |
| Account Number:   |                  |                                    |   |                 |                         |          |                       |                                   |  |
| Account Number:   |                  |                                    |   |                 |                         |          |                       |                                   |  |
|   |                  | (Use                               | (Total  | of th           | Subt<br>iis pa<br>fotal | ige)     | \$23,088.00           | \$23,088.00                       | \$0.00   |
| Sheet no. 1 of 2 continuation sheets attached to  |                  | Sche of Sche (Use                  | edule E. Report also on the Summ<br>chedules.)  conly on last page of the complete<br>edule E. If applicable, report also | nary<br>T<br>ed | Γotal                   | s        |                       |                                   |  |
| heet no. 1 of 2 continuation sheets attached to chedule of Creditors Holding Unsecured Priority Claims Liabilities and Related Data.) |                  |                                    |   |                 |                         |          |                       |                                   |  |

Document Page 20 of 62 Official Form 6E (12/07) In Re: \_\_\_\_ Grady, Christopher Case No. Debtor (if known) Taxes Type of Priority Husband, Wife, Joint, or Community Unliquidated Amount Not Amount Date Claim was Incurred, Disputed Entitled to Entitled Creditor's Name and Mailing Address Total Amount and Consideration for Claim to Priority Priority, If Including Zip Code of Claim Any H 2006 11,000.00 11,000.00 0.00 Account Number: Income Taxes IRS Account Number: Account Number: Account Number: Account Number: Account Number:

Total
(Use only on last page of the completed
Schedule E. Report also on the Summary
of Schedules.)

Subtotal

(Total of this page)

\$11,000.00

\$34,088.00

\$11,000.00

\$34,088.00

\$0.00

Totals
(Use only on last page of the completed
Schedule E. If applicable, report also on
the Statistical Summary of Certain
Liabilities and Related Data.)

Sheet no. 2 of 2 continuation sheets attached to Schedule of Creditors Holding Unsecured Priority Claims

|                    | Document | Paye 21 01 02 |      |
|--------------------|----------|---------------|------|
|                    |          |               |      |
| Grady, Christopher |          | Case No.      | <br> |

(if known)

# SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

Official Form 6F (12/07)

Debtor

In Re:

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts filing a case under chapter 7, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

| Check this box if debtor has no creditors holding  | g uns    | ecured                             | nonpriority claims to report on this Schedule F.  |            |              |             |                 |
|--|----------|------------------------------------|---|------------|--------------|-------------|-----------------|
| Creditor's Name and Mailing Address Including Zip Code, and Account Number                     | Codebtor | Husband, Wife, Joint, or Community | Date Claim was Incurred and<br>Consideration for Claim. If Claim is<br>Subject to Setoff, so State. | Contingent | Unliquidated | Disputed    | Amount of Claim |
| Account Number: 35-0611XXXX  HFC PO Box 1547 Chesapeake VA 23327                               |          | н                                  | 8/1/2006<br>Consumer Credit   |            |              |             | 13426.00        |
| Account Number: 514021  Barclays Bank 125 S West St Wilmington DE 19801                        |          | Н                                  | 11/1/2006<br>Consumer Credit  |            |              |             | 1659.00         |
| Account Number: 435237173659   |          | н                                  | 3/2008<br>Consumer Credit   |            |              |             | 741.00          |
| Account Number: 543362889904  First Premier_Bank 601 S. Minnnesota Avenue Sioux Falls SD 57104 |          | н                                  | 7/2008<br>consumer Credit   |            |              |             | 512.00          |
| Subtotal   |          |                                    |   |            |              | \$16,338.00 |                 |
| 0 continuation sheets attached   |          | (Re                                | (Use only on last page of the complete<br>port also on Summary of Schedules and, if applicable, or  |            | dule         |             | \$16,338.00     |

Summary of Certain Liabilities and Related Data.)

| In Re: Grady, Christopher  |  |                                    | Case No   |            |                |          |                 |
|--|--|------------------------------------|---|------------|----------------|----------|-----------------|
| Debtor   |  |                                    |   | (if k      | поw            | n)       |                 |
| Creditor's Name and Mailing Address<br>Including Zip Code,<br>and Account Number | Codebtor   | Husband, Wife, Joint, or Community | Date Claim was Incurred and<br>Consideration for Claim. If Claim is<br>Subject to Setoff, so State.   | Contingent | Unliquidated   | Disputed | Amount of Claim |
| Account Number: 60113810   |  | Н                                  | 5/2008  | 1          |                |          | 1239.00         |
| HSBC Bank PO Box 5253 Carol Stream IL 60197                                      |  |                                    | Consumer Credit   |            |                |          |                 |
| Account Number: _412061304495  | <del>                                     </del> | Н                                  | 6/2003  | 1          |                |          | 5287.00         |
| Merrick Bank<br>PO Box 5000<br>Draper UT 84020                                   | İ  | i<br>                              | Consumer Credit   |            |                |          |                 |
| Account Number: 50499413   | _  | Н                                  | 12/2007   |            |                |          | 872.00          |
| Sears<br>PO Box 6189<br>souix Falls SD 57117                                     |  |                                    |   |            |                |          |                 |
| Account Number: 614075   |  | Н                                  | 07/2003   |            |                |          | 8912.00         |
| Washington Mutual /Providian<br>PO Box 9180<br>PLEASANTON, CA 94566              |  |                                    | Consumer Credit   |            |                |          |                 |
| Account Number: GV07033186-00  |  | J                                  | 11/08   | 1          |                |          | 1428.00         |
| Reston Dental Arts<br>11503 Sunrise Valley Drive<br>Reston VA 20191              |  |                                    | Co Signer on account  |            |                |          |                 |
| Account Number: Loan 04  | +  | Н                                  | 5/2008  | -          |                |          | 4019.08         |
| Fidelity<br>82 Devonshire Street<br>Boston MA 02109                              | <u></u>  | **                                 | 401K Loan   |            |                |          | 1015.00         |
| Account Number: Loan 03  | +-   | Н                                  | 5/2008  |            | Н              |          | 2009.00         |
| Fidelity<br>82 Devonshire Street<br>Boston MA 02109                              |  |                                    | 401K Loan   |            |                |          |                 |
|  |  |                                    |   | 3          | Subte          | otal     | \$23,766.08     |
|  |  | (Re                                | (Use only on last page of the completed<br>port also on Summary of Schedules and, if applicable, on<br>Summary of Certain Liabilities and I | the St     | dule<br>atisti | ical     |                 |

Sheet no. 1 of 2 continuation sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

| In Re: Grady, Christopher   |          |                                    | Case No.   |            |                |          |                 |
|---|----------|------------------------------------|--|------------|----------------|----------|-----------------|
| Debtor  |          |                                    |  | (if k      | now            | n)       |                 |
| Creditor's Name and Mailing Address<br>Including Zip Code,<br>and Account Number  | Codebtor | Husband, Wife, Joint, or Community | Date Claim was Incurred and<br>Consideration for Claim. If Claim is<br>Subject to Setoff, so State.                                      | Contingent | Unliquidated   | Disputed | Amount of Claim |
| Account Number: Loan 02   |          | Н                                  | 9/2007   |            |                |          | 3804.06         |
| Fidelity<br>82 Devonshire Street<br>Boston MA 02109   |          |                                    | 401K Loan  |            |                |          |                 |
| Account Number: 148591  |          | Н                                  | Collection Account   | $\vdash$   |                |          | 142.00          |
| CRD PRT ASSO<br>ONE GALLERIA TOWER 13355 NOEL<br>ROAD S<br>Dallas TX 75240  |          | •                                  |  |            |                |          |                 |
| Account Number:   |          | Н                                  | Collectoin Account   |            |                |          | 7507.00         |
| Fair Collections and Out<br>12304 BALTIMORE AVE STE<br>Beltsville MD 20705  |          |                                    |  |            |                |          |                 |
| Account Number:   |          | Н                                  | Payday Loan  |            |                |          |                 |
| Up Front Payday LLC<br>2274 south 1300 east Suite G-8-273<br>Salt Lake City, UT 84106   |          |                                    |  |            |                |          |                 |
| Account Number:   |          | Н                                  | Payday Loan  | ┢          |                |          | 1500.00         |
| Cash Transfer Centers Northway Broker Ltd<br>Level 8 suite 3<br>Plaza Commercial Center, Bisazza Street<br>Silema SLM15 Malta |          | ••                                 | Tayony Louis   | !          |                |          | 1300.00         |
| Account Number:   |          | Н                                  |  |            |                |          |                 |
| Northway Financial DBA Cash transfer Centers P.O. Box 1216 Oak, PA 19456  |          |                                    |  |            |                |          |                 |
| Account Number:   |          | Н                                  | Judgement creditor   |            |                |          | 7500.00         |
| Harbor Park LP<br>11410 Esplanade Drive<br>Reston VA 20194  |          |                                    | -  |            |                |          |                 |
|   |          | -                                  |  |            | Subto          | otal     | \$20,453.06     |
|   |          | (Re                                | (Use only on last page of the completed port also on Summary of Schedules and, if applicable, on to Summary of Certain Liabilities and R | he St      | dule<br>atisti | cal      | \$60,557.14     |

|                          | Debtor             |          |              | (if known) |
|--------------------------|--------------------|----------|--------------|------------|
| In Re:                   | Grady, Christopher |          | Case No.     |            |
| Official Form 6G (12/07) |                    |          |              |            |
|                          |                    | Document | rage 27 or c |            |

# SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

☐ Check this box if debtor has no executory contracts or unexpired leases.

| Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract | Description of Contract or Lease and Nature of Debtor's Interest. State Whether Lease is for Nonresidential Real Property. State Contract Number of Any Government Contract |
|---|---|
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |
|   |   |

|  | Document   | Page 25 of 62  | · · · · · · · · · · · · · · · · · · ·   |
|--|--|--|---|
| Official Form 6H (   | 12/07)   | · ·  |   |
| In Re:   | Grady, Christopher   | Case No.   |   |
|  | Debtor   |  | (if known)  |
|  |  |  |   |
|  | SCHEDUI  | LE H - CODEBTORS   | 8   |
| debtor in the sch<br>commonwealth,<br>Wisconsin) with<br>former spouse w<br>nondebtor spous<br>child's initials as | formation requested concerning any person or entity, of nedules of creditors. Include all guarantors and co-signe or territory (including Alaska, Arizona, California, Idah tin the eight year period immediately preceding the complete or resides or resided with the debtor in the community se during the eight years immediately preceding the condithe name and address of the child's parent or guardia see, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m). | ers. If the debtor resides or resided<br>o, Louisiana, Nevada, New Mexic<br>mencement of the case, identify t<br>property state, commonwealth, or<br>mencement of this case. If a mine | d in a community property state, co, Puerto Rico, Texas, Washington, or the name of the debtor's spouse and of any r territory. Include all names used by the or child is a codebtor or a creditor, state the |
| Check this   | box if debtor has no codebtors.  |  |   |
| Name and Mailin  | g Address of Codebtor  | Name and Mailing Add   | dress of Creditor   |
| Maria R. Grady   |  | GMAC<br>PO Box 4622<br>Waterloo IA 50704   |   |
|  |  |  |   |

| Document | Page 26 of 62 |
|----------|---------------|

| Official | Form | ΚT | (12 | (07) |
|----------|------|----|-----|------|

| In Re: | Grady, Christopher | Case No.   |  |
|--------|--------------------|------------|--|
|        | Debtor             | (if known) |  |

# SCHEDULE I - CURRENT INCOME OF INDIVIDUAL DEBTOR(S)

The column labeled "Spouse" must be completed in all cases filed by joint debtors and by a married debtor, whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. Do not state the name of any minor child. The average monthly income calculated on this form may differ from the current monthly income calculated on Form 22A, 22B, or 22C.

| Debtor's Marital  | D   | EPENDENTS O | F DEBTO  | R AND SPOUSE      |          |      |
|---|---|-------------|----------|-------------------|----------|------|
| Status: Separated   | RELATIONSHIP Daughter Son                           | AGE 6<br>4  |          |                   |          |      |
| Employment:   | DEBTOR  | <del></del> |          |                   | SPOUSE   |      |
| Occupation  | Program Manager                                     |             |          |                   |          |      |
| Name of Employer  | AT&T  |             |          |                   |          |      |
| How Long Employed   | 3 Years   |             |          | _                 |          |      |
| Address of Employer   | 909 Chestnut Street 28K07<br>St Louis MO 63101-3002 |             |          |                   |          |      |
|   | average monthly income)                             |             |          |                   |          |      |
| (Prorate if not paid r  | oss wages, salary, and commissions                  |             | \$       | 7631.00           | \$       |      |
| 2. Estimated monthly of                                       |   |             | \$       | 7051.00           | \$       |      |
|   |   |             | ·        |                   | •        |      |
| 3. SUBTOTAL   |   |             | \$       | 7,631.00          | \$       | 0.00 |
| 4 X B00 B L 27 0 0  |   |             |          |                   |          |      |
|   | L DEDUCTIONS  |             | 4        | 1257.17           | ø        |      |
| <ul> <li>a. Payroll taxes an</li> <li>b. Insurance</li> </ul> | d social security                                   |             | \$<br>\$ | 1357.16<br>140.60 | \$<br>\$ |      |
| c. Union dues   |   |             | \$       | 140.00            | \$       |      |
| d. Other (Specify)  | ): Retirement                                       |             | \$       | 250.74            | \$       |      |
| a. older (specify)  | , rememen   |             | Ψ        | 230.74            | Ψ        |      |
| 5. SUBTOTAL O   | F PAYROLL DEDUCTIONS                                |             | \$       | 1,748.50          | \$       | 0.00 |
| 6. TOTAL NET MON  | THLY TAKE HOME PAY                                  |             | \$       | 5,882.50          | \$       | 0.00 |
| 7. Regular income from  | n operation of business or profession or firm       |             | \$       |                   | \$       |      |
| (Attach detailed statem                                       | nent)   |             |          |                   |          |      |
| 8. Income from real pro                                       | • •   |             | \$       |                   | \$       |      |
| <ol><li>Interest and dividend</li></ol>                       |   |             | \$       |                   | \$       |      |
|   | ince or support payments payable to the debtor for  |             |          |                   |          |      |
|   | at of dependents listed above                       |             | \$       |                   | \$       |      |
|   | other government assistance                         |             | ø        |                   | \$       |      |
| (Specify):<br>12. Pension or retireme                         | ant income  |             | \$       |                   | <b>c</b> |      |
| 13. Other monthly inco  |   |             | \$<br>\$ |                   | \$<br>\$ |      |
| Specify:  | лис   |             | Ð        |                   | Ф        |      |
| 14. SUBTOTAL OF L   | INES 7 THROUGH 13                                   |             | \$       | 0.00              | \$       | 0.00 |
|   | Y INCOME (Add amounts shown on lines 6 and 1        | 4)          | \$       | 5,882.50          | \$       | 0.00 |
|   | ED MONTHLY INCOME \$ 5,882.50                       |             |          |                   |          |      |

<sup>17.</sup> Describe any increase or decrease in income reasonably anticipated to occur within the year following the filing of this document:

Document Page 27 of 62

| Official | Form | 6J | (12/07) |
|----------|------|----|---------|
|----------|------|----|---------|

| In Re: | Grady, Christopher | Case No.   |  |
|--------|--------------------|------------|--|
|        | Debtor             | (if known) |  |

# SCHEDULE J - CURRENT EXPENDITURES OF INDIVIDUAL DEBTOR(S)

| Complete this schedule by estimating the average monthly expenses of the debtor and the debtor's family. Proquarterly, semi-annually, or annually to show monthly rate. The average monthly expenses calculated on this for allowed on Form 22A or 22C. | * * *                    | •             |
|---|--------------------------|---------------|
| Check this box if a joint petition is filed and debtor's spouse maintains a separate household. Complete a slabeled "Spouse".   | separate schedule of exp | penditures    |
| 1. Rent or home mortgage payment (include lot rented for mobile home)  a. Are real estate taxes included?  Yes No  b. Is property insurance included?  Yes No   | \$                       | 3400.00       |
| 2. Utilities: a. Electricity and heating fuel   | \$                       | 300.00        |
| b. Water and sewer  | \$                       | 33.00         |
| c. Telephone  | \$                       | 33.00         |
| d. Other Cable TV   | \$                       | 33.00         |
| 3. Home maintenance (repairs and upkeep)  | \$                       | 50.00         |
| 4. Food   | \$                       | 250.00        |
| 5. Clothing   | \$                       | 0             |
| 6. Laundry and dry cleaning   | \$                       | 0             |
| 7. Medical and dental expenses  | \$                       | 0             |
| 8. Transportation (not including car payments)  | \$                       | 200.00        |
| 9. Recreation, clubs and entertainment, newspapers, magazines   | \$                       | 0             |
| 10. Charitable contributions  | \$                       | 0             |
| 11. Insurance (not deducted from wages or included in home mortgage payments)   |                          |               |
| a. Homeowner's or renters   | \$                       | 0             |
| b. Life   | \$                       | 0             |
| c. Health   | \$                       | 0             |
| d. Auto   | \$                       | 65.00         |
| e. Other IRS Back Taxes   | \$                       | 250.00        |
| 12. Taxes (not deducted from wages or included in home mortgage payments)  Specify:   | \$                       |               |
|   |                          |               |
| 13. Installment payments: (In chapter 11, 12 or 13 cases, do not list payments to be included in the plan)  | ø                        | <b>200.00</b> |
| a. Auto   | \$                       | 699.00        |
| b. Other  | \$                       |               |
| c. Other  | \$                       |               |
| 14. Alimony, maintenance, and support paid to others  | \$                       |               |

19. Describe any increase or decrease in expenditures reasonably anticipated to occur within the year following the filing of this document:

### 20. STATEMENT OF MONTHLY NET INCOME

18. AVERAGE MONTHLY EXPENSES (Total lines 1-17.)

17. Other

15. Payments for support of additional dependents not living at your home

16. Regular expenses from operation of business, profession, or farm (attach detailed statement)

| a. Average monthly income from Line 15 of Schedule I | \$<br>5,882.50  |
|--|-----------------|
| b. Average monthly expenses from Line 18 above       | \$<br>7089.00   |
| c. Monthly net income (a. minus b.)                  | \$<br>-1,206.50 |

1776.00

7,089.00

\$

\$

\$

\$

|   | Docume   | ent Page 28 of 62  |
|---|--|--|
| In Re:  | Grady, Christopher   | Case No.   |
|   | Debtor   | (if known)   |
|   | DECLARATION CON  | CERNING DEBTOR(S) SCHEDULES  |
|   | DECLARATION UNDER PE   | NALTY OF PERJURY BY INDIVIDUAL DEBTOR  |
|   | re under penalty of perjury that I have read the foregoing ary page plus 2), and that they are true and correct to the Date  | sing summary and schedules, consisting of 21 sheets (total shown on the best of my knowledge, information, and belief.  Signature of Debtor  |
|   | Date   | Signature of Joint Debtor  |
| compensation<br>110(h), and 34<br>chargeable by<br>debtor or acce | r penalty of perjury that: (1) I am a bankruptcy petition<br>and have provided the debtor with a copy of this docu<br>12(b); (3) if rules or guidelines have been promulgated<br>bankruptcy petition preparers, I have given the debtor<br>pting any fee from the debtor, as required under that s | OF BANKRUPTCY PETITION PREPARER (See 11 U.S.C. § 110)  In preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for timent and the notices and information required under 11 U.S.C. §§ 110(b), pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services notice of the maximum amount before preparing any document for filing for a section; and (4) I will not accept any additional money or other property from |
|   | ore the filing fee is paid in full.  | 548-83-9605  |
| LawyerAltern<br>Printed or Ty                                     | ped Name and Title, if any, of Bankruptcy Petition Pr  |  |
| person or part  | acy petition preparer is not an individual, state the nature who signs this document. Young Street UT 84050  | me, title (if any), address, and social-security number of the officer, principal, responsible   |
| X /s/ J. Chr  | ristian Barlow   | 07 January 2009  |
|   | of Bankrupicy Petition Preparer  | Date   |
| Names and So<br>not an individu                                   |  | pared or assisted in preparing this document, unless te bankruptcy petition preparer is  |
| A bankruptcy  |  | signed sheets conforming to the appropriate Official Form for each person.<br>ons of Title 11 and the Federal Rules of Bankruptcy Procedure may result in  |

I, \_\_\_\_\_\_\_ named as debtor in this case, declare under penalty of perjury that I have read the foregoing summary of schedules, consisting of sheets (total shown on summary page plus 1), and that the are true and correct to the best of my knowledge, information, and belief.

Date

Signature of Authorized Individual

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisionment for up to 5 years or both. 18 U.S.C. § 152 and 3571.

#### FORM 7. STATEMENT OF FINANCIAL AFFAIRS

# UNITED STATES BANKRUPTCY COURT

### Eastern District of Virginia, Alexandria Division

| In Re: | Grady, Christopher | Case No.   |  |
|--------|--------------------|------------|--|
|        | Debtor             | (if known) |  |

### STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfer and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112 and Fed. R. Bankr. P. 1007(m).

Questions 1-18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19-25. If the answer to an applicable question is "None", mark the box labeled "None". If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

#### DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any owner of 5 percent or more of the voting or equity securities of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; any managing agent of the debtor. 11 U.S.C. § 101.

#### None 1. Income from employment or operation of business

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the two years immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| Amount           | Source |  |
|------------------|--------|--|
| YTD: 3815.50     | AT&T   |  |
| 2008: 103,077.70 | AT&T   |  |
| 2007: 81,11422   | AT&T   |  |

## 2. Income other than from employment or operation of business

None

 $\boxtimes$ 

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the two years immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Amount

Source

#### 3. Payments to creditors

None



a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts, aggregating more than \$600 to any creditor, [except for a debt on account of a domestic support obligation,] made within 90 days immediately preceding the commencement of this case. Indicate with an \* any payments that were made to the creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and creditor counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Nane and Address of Creditor

Dates of Payments Amount Paid Amount Still Owing

None



b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 days immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$5,475. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counselig agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

Name and Address of Creditor

Dates of Payments/ Transfers Amount Paid or Value of Transfers Amount Still Owing

# Document Page 31 of 62

None [

c. All debtors: List all payment made within one year immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Creditor and Relationship to Debtor

Date of Payment

Amount Paid Amount Still Owing

### 4. Suits and administrative proceedings, executions, garnishments and attachments

None [

a. List all suits and administrative proceedings to which the debtor is or was a party within one year immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Caption of Suit and Case Number

Nature of Proceeding

Court or Agency and Location

Status or Disposition

HARBOR PARK LP 11410 Esplanade Drive Reston VA 20194 Civil

Fairfax County District Court

GV0801117200

# Document Page 32 of 62

None

 $\boxtimes$ 

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Person for Whose Benefit Property was Seized Date of Seizure Description and Value of Property

### 5. Repossessions, foreclosures and returns

None

 $\boxtimes$ 

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Creditor or Seller Date of Repossession, Foreclosure Sale, Transfer or Return

Description and Value of Property

# Document Page 33 of 62

#### 6. Assignments and receiverships

None 🛛

a. Describe any assignment of property for the benefit of creditors made within 120 days immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Assignee

Date of Assignment Terms of Assignment or Settlement

None

b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Custodian

Name and Location of Court Case Title & Number

Date of Order

Description and Value of Property

# Document Page 34 of 62

#### 7. Gifts

None

 $\boxtimes$ 

List all gifts or charitable contributions made within one year immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Person or Organization

Relationship to Debtor, if any

Date of Gift

Description and Value of Gift

#### 8. Losses

None 🛛

List all losses from fire, theft, other casualty or gambling within one year immediately preceding the commencement of this case or since the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Description of Circumstances and if

Description and Value

Description of Circumstances and, if Loss was Covered in Whole or in Part by Insurance, Give Particulars.

of Property by

Date of Loss

#### 9. Payments related to debt counseling or bankruptcy

None 🛛

195 W. Young St Morgan UT 84050

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within one year immediately preceding the commencement of this case.

Name and Address of Payee LawyerAlternative Date of Payment, Name of Payor if other than Debtor 6 January 2009

Amount of Money or Description and Value of Property

250.00

# Document Page 35 of 62

#### 10. Other transfers

| None | $\boxtimes$ | a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of |
|------|-------------|--|
|      |             | the debtor, transferred either absolutely or as security within two years immediately preceding the commencement of        |
|      |             | this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses         |

whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Transferree, Relationship to Debtor

Date

Describe Property Transferred and Value Received

None b. List all property transferred by the debtor within ten years immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

Name of Trust or Other Device

Date(s) of Transfer(s)

Amount of Money or Description and Value of Property or Debtor's Interest in Property

# 11. Closed financial accounts

None

 $\boxtimes$ 

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within one year immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Institution

Type of Account, Last Four Digits of Account Number, and Amount of Final Balance

Amount and Date of Sale or Closing

# Document Page 36 of 62

#### 12. Safe deposit boxes

None \( \text{\text{List}} \) List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within one year immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.

Name and Address of Bank or Other Depository

Names and Addresses of those with Access to Box or Depository

Description of Contents

Date of Transfer or Surrender, if any

#### 13. Setoffs

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 days preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

Name and Address of Creditor

Date of Setoff

Amount of Setoff

#### 14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

Name and Address of Owner

Description and Value of Property

Location of Property

## Document Page 37 or 62

### 15. Prior address of debtor

None If the debtor has moved within the three years immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

Address Name Used Dates of Occupancy

## 16. Spouses and former spouses

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

Name

#### Document Page 38 of 62

|    | * *        |         |           |   |
|----|------------|---------|-----------|---|
| 17 | Environmen | ntal ir | iformatio | m |

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

 $\boxtimes$ 

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law.

Site Name and Address

Site Name and Address

Name and Address of Governmental Unit

Date of Notice

Environmental Law

 $\boxtimes$ b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release None of Hazardous Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

> Name and Address of Governmental Unit

Date of Notice

Environmental Law

c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with None respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

Name and Address of Governmental Unit

Docket Number

Status or Disposition

### Document Page 39 of 62

#### 18. Nature, location and name of business

None

 $\boxtimes$ 

a. If the debtor is an individual, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was a self-employed in a trade, profession, or other activity either full- or part-time within the six-years immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within the six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within the six years immediately preceding the commencement of this csae.

Name, Address, Last Four Digits of Soc. Sec. No. Complete EIN or Other Taxpayer I.D. No.

Nature of Business

Beginning and Ending Dates

None

 $\boxtimes$ 

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

Name

Address

### Document Page 40 of 62

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within the six years immediately preceding the commencement of this case, any of the following: an officer, directory, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or otherwise self-employed.

(An individual or joint debtor should complete this portion of the statement only if the debtor is or has been in business, as defined above, within the six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

| None    b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of this debtor.  |               |
|--|---------------|
| bankruptcy case kept or supervised the keeping of books of account and records of the debtor.  Name and Address  Dates Servi  None  b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of this debtor.  Name and Address  Dates Servi  None  c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain. |               |
| None    b. List all firms or individuals who within the two years immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of this debtor.  Dates Servi  None    c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.   |               |
| have audited the books of account and records, or prepared a financial statement of this debtor.  Name and Address  Dates Servi  None   c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.   | ices Rendered |
| have audited the books of account and records, or prepared a financial statement of this debtor.  Name and Address  Dates Servi  None   c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.   |               |
| have audited the books of account and records, or prepared a financial statement of this debtor.  Name and Address  Dates Servi  None   c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.   |               |
| have audited the books of account and records, or prepared a financial statement of this debtor.  Name and Address  Dates Servi  None   c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.   |               |
| have audited the books of account and records, or prepared a financial statement of this debtor.  Name and Address  Dates Servi  None   c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.   |               |
| have audited the books of account and records, or prepared a financial statement of this debtor.  Name and Address  Dates Servi  None   c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.   |               |
| None    c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.   |               |
| account and records of the debtor. If any of the books of account and records are not available, explain.  | ices Rendered |
| account and records of the debtor. If any of the books of account and records are not available, explain.  |               |
| account and records of the debtor. If any of the books of account and records are not available, explain.  |               |
| account and records of the debtor. If any of the books of account and records are not available, explain.  |               |
| account and records of the debtor. If any of the books of account and records are not available, explain.  |               |
| account and records of the debtor. If any of the books of account and records are not available, explain.  |               |
| Name and Address   |               |
|  |               |
|  |               |
|  |               |
|  |               |
|  |               |
|  |               |

d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a

financial statement was issued within the two years immediately preceding the commencement of this case by the debtor.

Date Issued

None

 $\boxtimes$ 

Name and Address

### 20. Inventories

| None 🔀      | _       | List the dates of the last two inventories taken of your property, the name of the person who supervised the of each inventory, and the dollar amount and basis of each inventory.                            | aking                            |
|-------------|---------|---|----------------------------------|
| Dote of Inc |         | Amount of Inv   | entory<br>market or other basis) |
| Date of Inv | ventory | inventory Supervisor (Spectry Cost,   | market of other basis)           |
| None 🔀      |         | List the name and address of the person having possession of the records of each of the two inventories reported in a., above.  |                                  |
| Date of Inv | ventory | Name and Address of Custodian of Inventory Records  |                                  |
|             |         |   |                                  |
|             | 21      | . Current Partners, Officers, Directors and Shareholders  |                                  |
| None 🗵      |         | If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.   |                                  |
| Name and    | Addres  | S Nature of Interest  | Percentage of Interest           |
| None 5      | 7 .     | If the debtor is a composition list all officers and directors of the composition and each at the later who also  | portly                           |
| None 🔀      | _       | If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly owns, controls, or holds 5 percent or more of the voting securities of the corporation. | Nature and Percentage            |
| Name and    | Addres  | S Title   | of Stock Ownership               |

|        |             | Document Page 42 of 62   |                                       |
|--------|-------------|--|---------------------------------------|
|        |             | 22. Former partners, officers, directors and shareholders  |                                       |
| None   | $\boxtimes$ | a. If the debtor is a partnership, list each member who withdrew from the partnership within one ye preceding the commencement of this case.   | ar immediately                        |
| Name a | ind Add     | ress   | Date of Withdrawal                    |
|        |             |  |                                       |
| None   | $\boxtimes$ | <ul> <li>b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation within one year immediately preceding the commencement of this case.</li> </ul>  | n terminated                          |
| Name a | and Add     |  | Date of Termination                   |
| None   | $\boxtimes$ | 23. Withdrawals from a partnership or distributions by a corporation  If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to including compensation in any form, bonuses, loans, stock redemptions, options exercised and any one year immediately preceding the commencement of this case. |                                       |
|        |             | ress of Recipient, Debtor Date and Purpose of Withdrawal   | Amount of Money and Value of Property |
|        |             |  |                                       |
|        |             | 24. Tax consolidation group  |                                       |
| None   | $\boxtimes$ | If the debtor is a corporation, list the name and federal taxpayer identification number of the parent consolidated group for tax purposes of which the debtor has been a member at any time within the immediately preceding the commencement of this case.   | •                                     |
| Name o | of Paren    | t Corporation  | Taxpayer Identification Number        |

## 25. Pension funds

 $\times$ If the debtor is not an individual, list the name and federal taxpayer identification number of any pension fund to None which the debtor, as an employer, has been responsible for contributing at any time within the six-year period immediately preceding the commencement of this case.

Name of Pension Fund

Taxpayer Identification Number

| [If completed by an individual or individual and spouse.]  |  |
|--|--|
| I declare under penalty of perjury that I have read the answers co attachments thereto and that they are true and correct.  Date   | x Signature of Debtor  |
| •  | x  |
| Date   | Signature of Joint Debtor  |
|  |  |
| [If completed on behalf of a partnership or corporation]   |  |
| I declare under penalty of perjury that I have read the answers co attachments thereto and that they are true and correct to the best of t |  |
|  | X Signature of Authorized Individual   |
| Date   | Signature of Authorized Individual   |
|  | Printed Name and Title   |
| I declare under penalty of perjury that: (1) I am a bankruptcy petition prep<br>compensation and have provided the debtor with a copy of this document<br>110(h), and 342(b); (3) if rules or guidelines have been promulgated pursu   | and the notices and information required under 11 U.S.C. §§ 110(b), uant to 11 U.S.C. § 110(h) setting a maximum fee for services see of the maximum amount before preparing any document for filing for a |
| LawyerAlternative,llc.   | 548-83-9605  |
| Printed or Typed Name and Title, if any, of Bankruptcy Petition Preparer   | r Social-Security No. (Required by 11 U.S.C. § 110.)  itle (if any), address, and social-security number of the officer, principal, responsible  |
| y me vann upicy petition preparer is not an inavidual, state the name, to<br>person or partner who signs this document.  | ше (у ину), аситезя, ини зосин-зесину нитоет ој те одусет, ртногра, тегропѕин  |
| 195 W. Young Street  |  |
| Morgan UT 84050  |  |
| Address  |  |
| X /s/ J. Christian Barlow / Sull   | 07 January 2009  |
| Signature of Bankrupacy Petition Preparer  | Date   |
| Names and Social Security numbers of all other individuals who prepared  | or assisted in preparing this document, unless te bankruptcy petition preparer is  |

not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person. A bankruptcy petition preparer's failure to comply with the provisions of Title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

# Eastern District of Virginia, Alexandria Division

| Re:                   | Grady, Christopher   |                     | Case No.   |  |
|-----------------------|--|---------------------|--|--|
| <del> </del>          | Debtor   | _                   | •  | (if known)                                   |
|                       |  | f the estate. (Part | •  | T OF INTENTION pleted for EACH debt which is |
| Property No.          | 1  |                     |  |  |
| Creditor's Na         | ame:   |                     | Describe Property S                              | ecuring Debt:                                |
| GMAC                  |  |                     | 2205 Avonworth SQ                                | Ashburn VA 20148                             |
| Property will         | be (check one):  |                     |  |  |
| Surreno               | dered  | ⊠ Reta              | nined  |  |
| Redeen Reaffin Other. | •  |                     | _ (for example, avoid l<br>Not claimed as exempt | ien using 11 U.S.C. § 522(f)).               |
| Property No. 2        | 2 (if necessary)   |                     |  |  |
| Creditor's Na         | ame:   |                     | Describe Property S                              | ecuring Debt:                                |
| Wells Fargo A         | Auto Finance   |                     | 05 Nissan Armada                                 |  |
| Property will         | be (check one):  |                     |  |  |
| ☐ Surreno             | dered  | ⊠ Reta              | nined  |  |
| Redeen                | e property, I intend to (check<br>in the property<br>in the debt | at least one):      |  |  |
|                       |  |                     | (for example, avoid l                            | ien using 11 U.S.C. § 522(f)).               |
| Property is (cl       | heck one):   |                     |  |  |
| l <u>—</u>            | d as exempt  | $\boxtimes$ :       | Not claimed as exempt                            |  |

PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attached additional pages if necessary.)

| Property No. 1   |                           |   |  |  |
|--|---------------------------|---|--|--|
| Lessor's Name:   | Describe Leased Property: | Leased will be Assumed pursuant to 11 U.S.C. § 365(p)(2):  Yes No |  |  |
| Property No. 2 (if necessary)  |                           |   |  |  |
| Lessor's Name:   | Describe Leased Property: | Leased will be Assumed pursuant to 11 U.S.C. § 365(p)(2):  Yes No |  |  |
| Property No. 3 (if necessary)  |                           |   |  |  |
| Lessor's Name:   | Describe Leased Property: | Leased will be Assumed pursuant to 11 U.S.C. § 365(p)(2):  Yes No |  |  |
| I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.  X  Signature of Debtor |                           |   |  |  |

Signature of Joint Debtor

| D224 (Official Forms 224)/Chamber (7)/42/69) | Document | Page 46 of 62   |
|--|----------|---|
| B22A (Official Form 22A)(Chapter 7)(12/08)   |          | According to the information required to be entered on this statement |
| In re Grady, Christopher                     |          | (check one box as directed in Part I, III, or VI of this statement):  |
| Debtor(s)                                    |          | ☐ The presumption arises.   |
| Case Number:                                 |          | The presumption does not arise.                                       |
| (If known)                                   |          | ☐ The presumption is temporarily inapplicable.                        |

# CHAPTER 7 STATEMENT OF CURRENT MONTHLY INCOME AND MEANS-TEST CALCULATION

In addition to Schedules I and J, this statement must be completed by every individual chapter 7 debtor, whether or not filing jointly. Unless the exclusion in Line 1C applies, joint debtors may complete a single strement. If the exclusion in Line 1C applies, each joint filer must complete a separate statement.

|          | Her L MIE TARYS IN DESIGNE FRANCE SERVE FRANCE STATE   |
|----------|--|
|          | <b>Disabled Veterans.</b> If you are a disabled veteran described in the Declaration in this Part 1A, (1) check the box at the beginning of the Declaration, (2) check the box for "The presumption does not arise" at the top of this statement, and (3) complete the verification in Part VIII. Do not complete any of the remaining parts of this statement.  |
| Da       | Declaration of Disabled Veteran. By checking this box, I declare under penalty of perjury that I am a disabled veteran (as defined in 38 U.S.C. § 3741(1)) whose indebtedness occurred primarily during a period in which I was on active duty (as defined in 10 U.S.C. § 101(d)) or while I was performing a homeland defense activity (as defined in 32 U.S.C. § 901(1)).  |
| 18       | Non-consumer Debtors. If your debts are not primarily consumer debts, check the box below and complete the the verification in Part VIII. Do not complete any of the remaining parts of this statement.  |
|          | Declaration of non-consumer debts. By checking this box, I declare that my debts are not primarily consumer debts.   |
| 中<br>(1) | Reservists and National Guard Members; active duty or homeland defense activity. Members of a reserve component of the Armed Forces and members of the National Guard who were called to active duty (as defined in 10 U.S.C. § 101(d)(1)) after September 11, 2001, for a period of at least 90 days, or who have performed homeland defense activity (as defined in 32 U.S.C. § 901(1)) for a period of at least 90 days, are excluded from all forms of means testing during the time of active duty or homeland defense activity and for 540 days thereafter (the "exclusion period"). If you qualify for this temporary exclusion, (1) check the appropriate boxes and complete any required information in the Declaration of Reservists and National Guard Members below, (2) check the box for "The presumption is temporarily inapplicable" at the top of this statement, and (3) complete the verification in Part VIII. During your exclusion period you are not required to complete the balance of this form, but you must complete the form no later than 14 days after the date on which your exclusion period ends, unless the time for filing a motion raising the means test presumption expires in your case before your exclusion period ends. |
|          | Declaration of Reservists and National Guard Members. By checking this box and making the appropriate entries below, I declare that I am eligible for a temporary exclusion from means testing because, as a member of a reserve component of the Armed Forces or the National Guard   |
|          | a. I was called to active duty after September 11, 2001, for a period of at least 90 days and I remain on active duty /or/   |
|          | I was released from active duty on, which is less than 540 days before this bankruptcy case was filed;  OR   |
|          | b. I am performing homeland defense activity for a period of at least 90 days /or/ I performed homeland defense activity for a period of at least 90 days, terminating on , which is less than 540 days before this bankruptcy case was filed.   |

|  | Kara Calculationer <mark>ise</mark> r   |  |  | 71617          |                          |                                |
|--|---|--|--|----------------|--------------------------|--------------------------------|
| <ul> <li>Marital/filing status. Check the box that applies and complete the balance of this part of this statement as directed.</li> <li>a. ☐ Unmarried. Complete only Column A ("Debtor's Income") for Lines 3-11.</li> <li>b. ☒ Married, not filing jointly, with declaration of separate households. By checking this box, debtor declares under penalty of perjury: "My spouse and I are legally separated under applicable non-bankruptcy law or my spouse and I are living apart other than for the purpose of evading the requirements of § 707(b)(2)(A) of the Bankruptcy Code."  Complete only Column A ("Debtor's Income") for Lines 3-11.</li> <li>c. ☐ Married, not filing jointly, without the declaration of separate households set out in Line 2.b above. Complete both Column A ("Debtor's Income") and Column B (Spouse's Income") for Lines 3-11.</li> <li>d. ☐ Married, filing jointly. Complete both Column A ("Debtor's Income") and Column B ("Spouse's Income") for Lines 3-11.</li> </ul> |   |  |  |                |                          |                                |
| the si   | igures must reflect average monthly income in<br>ix calendar months prior to filing the bankrup<br>th before the filing. If the amount of monthly<br>divide the six-month total by six, and enter t | otcy case, ending of income varied dur | on the last day of the ring the six months   | he             | Column A Debtor's Income | Column B<br>Spouse's<br>Income |
|  | s wages, salary, tips, bonuses, overtime, com   |  |  |                | 7,631.00                 |                                |
| busin<br>Do n<br>enter   | enter the difference in the appropriate columnuess, profession or farm, enter aggregate num ot enter a number less than zero. Do not included on Line b as a deduction in Part V.                   | bers and provide                       | details on an attacl                         | nment.         |                          | S                              |
| a.   | Gross receipts  | <u> </u>                               |  |                | İ                        |                                |
| b.   | Ordinary and necessary business expenses Business income  | Subtract Line b f                      | rom Line s                                   | [              |                          |                                |
| Rent<br>in the   | and other real property income. Subtract Lire appropriate column(s) of Line 5. Do not enpart of the operating expenses entered on Lin   | ne b from Line a arter a number less t | nd enter the different<br>han zero. Do not i | ence<br>nclude |                          |                                |
| a.   | Gross receipts  |  |  |                |                          |                                |
| b.   | Ordinary and necessary operating expenses   |  |  | {              |                          |                                |
| c.   | Rent and other real property income   | Subtract Line b f                      | rom Line a                                   |                |                          |                                |
|  | ests, dividends, and royalties.   |  |  |                |                          | <u> </u>                       |
| Pensi  | ion and retirement income.  |  |  |                |                          |                                |
| Any amounts paid by another person or entity, on a regular basis, for the household expenses of the debtor or the debtor's dependents, including child support paid for that purpose. Do not include alimony or separate maintenance payments or amounts paid by your spouse if Column B is completed.   |   |  |  |                |                          |                                |
| Unemployment compensation. Enter the amount in the appropriate column(s) of Line 9. However, if you contend that unemployment compensation received by you or your spouse was a benefit under the Social Security Act, do not list the amount of such compensation in Column A or B, but instead state the amount in the space below:  Unemployment compensation claimed to  |   |  |  |                |                          |                                |
|  | benefit under the Social Security Act   | Debtor                                 | Spouse                                       |                |                          |                                |

| ncome from all other sources. Specify source and cources on a separate page. Do not include alimon paid by your spouse if Column B is completed, building or separate maintenance. Do not include Security Act or payments received as a victim of victim of international or domestic terrorism.                     | ny or separate maintenance payments<br>ut include all other payments of<br>any benefits received under the Social  |   |  |  |
|---|--|---|--|--|
| a. b. Total and enter on Line 10  |  |   |  |  |
|   |  | 7,631.00  | 0.00   |  |
| Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.  7,63   |  |   |  |  |
| en m appearx  | Violen (1) (2) (2/11/11 profile (12 en en en   |   |  |  |
| Annualized Current Monthly Income for § 707(b) 2 and enter the result.  | (7). Multiply the amount from Line 12 by   | the number  | 91,572.00  |  |
| nousehold size. (This information is available by he bankruptcy court.  | family size at www.usdoj.gov/ust/ or from  |   | 70.405.00  |  |
|   |  | <del></del>   | 70,485.00  |  |
| Application of Section 707(b)(7). Check the applicable box and proceed as directed.  The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumption does not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete Parts IV, V, VI or VII. |  |   |  |  |
| The amount on Line 13 is more than the amou   | unt on Line 14. Complete the remaining par   | rts of this stateme   | ent.   |  |
|   | a. b. Total and enter on Line 10 Subtotal of Current Monthly Income for § 707(b) and, if Column B is completed, add Lines 3 throughout the completed of the second completed o | Annualized Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by 2 and enter the result.  Applicable median family income. Enter the median family income for the applicable state a sousehold size. (This information is available by family size at www.usdoj.gov/ust/ or from the bankruptcy court.  Enter the debtor's state of residence: Virginia b. Enter debtor's household size: 3 Application of Section 707(b)(7). Check the applicable box and proceed as directed.  The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for not arise" at the top of page 1 of this statement, and complete Part VIII; do not complete | Security Act or payments received as a victim of a war crime, crime against humanity, or as victim of international or domestic terrorism.  a.  b.  Total and enter on Line 10  Subtotal of Current Monthly Income for § 707(b)(7). Add Lines 3 thru 10 in Column A, and, if Column B is completed, add Lines 3 through 10 in Column B. Enter the total(s).  Total Current Monthly Income for § 707(b)(7). If Column B has been completed, add Line 11, Column A to Line 11, Column B, and enter the total. If Column B has not been completed, enter the amount from Line 11, Column A.  Total Current Monthly Income for § 707(b)(7). Multiply the amount from Line 12 by the number 2 and enter the result.  Applicable median family income. Enter the median family income for the applicable state and tousehold size. (This information is available by family size at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.  a. Enter the debtor's state of residence: Virginia b. Enter debtor's household size: 3  Application of Section 707(b)(7). Check the applicable box and proceed as directed.  The amount on Line 13 is less than or equal to the amount on Line 14. Check the box for "The presumptical country in the clerk of the amount on Line 14 to the check the box for "The presumptical country in the clerk of the amount on Line 14. Check the box for "The presumptical country in the clerk of the amount on Line 14. Check the box for "The presumptical country in the clerk of the country in the clerk of the amount on Line 14. Check the box for "The presumptical country in the clerk of the country in the clerk of the country in the clerk of the country in the clerk of the country in the clerk of the country in the clerk of the country in the clerk of the country in the clerk of the country in the clerk of the country in the clerk of the country in the clerk of the country in the clerk of the country in the clerk of the country in the clerk of the country in the clerk of the country in the clerk of the country in the clerk of the country in the c |  |

# Complete Parts IV, V, VI, and VII of this statement only if required. (See Line 15.)

|   | STATE OF THE CASE OF THE PROPERTY OF THE PROPE |          |  |  |  |  |
|---|--|----------|--|--|--|--|
|   | Enter the amount from Line 12.   | 7,631.00 |  |  |  |  |
| Ü | Marital adjustment. If you checked the box at Line 2.c, enter on Line 17 the total of any income listed in Line 11, Column B that was NOT paid on a regular basis for the household expenses of the debtor or the debtor's dependents. Specify in the lines below the basis for excluding the Column B income (such as payment of the spouse's tax liability or the spouse's support of persons other than the debtor or the debtor's dependents) and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If you did not check box at Line 2.c, enter zero.  |          |  |  |  |  |
|   | a  |          |  |  |  |  |
|   | b.   | :        |  |  |  |  |
|   | Total and enter on Line 17.  |          |  |  |  |  |
|   | Current monthly income for § 707(b)(2). Subtract Line 17 from Line 16 and enter the result.  | 7631.00  |  |  |  |  |
|   | and the state of t |          |  |  |  |  |
|   | Tables (A. Dienston under Augubern, al. In. Liebeng Kreening vor die Elis)   |          |  |  |  |  |
|   | National Standards: food, clothing and other items. Enter in Line 19A the "Total" amount from IRS National Standards for Food, Clothing and Other Items for the applicable household size. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.)  | 1,151.00 |  |  |  |  |

| 148      | of-Po<br>of-Po<br>www<br>your<br>house<br>the m<br>under<br>meml   | nal Standards: health care. Entercket Health Care for persons uncket Health Care for persons 65 usdoj.gov/ust/ or from the clerkhousehold who are under 65 years of age, a umber stated in Line 14b.) Multipe 65, and enter the result in Line 19th, and enter the result in Line 19th, and enter the result in Line 19th, and enter the result in Line 19th. | der 65 years of age or of the bankrupte ars of age, and enter in Line biply Line all by Line call. Multiply Line call. | ge, and lder. y conter in 2 the ine be a2 | nd in L (This urt.) Er Line t numb 1 to ob | ine a2 the IRS National Sinformation is available atter in Line b1 the number of member of members of your tain a total amount for he b2 to obtain a total amount | Standards for<br>the of members of your<br>ousehold mount for hou | ers of embers sehold | 171.00 |
|----------|--|---|--|---|--|---|---|----------------------|--------|
|          | Hou  | sehold members under 65 years   | of age   | Hot                                       | sehold                                     | members under 65 years  | of age  |                      |        |
|          | a1.  | Allowance per member  | 57.00  | a1.                                       | Allov                                      | vance per member  |   |                      |        |
|          | ы.   | Number of members   | 3  | b1.                                       | Numl                                       | per of members  |   |                      |        |
|          | c1.  | Subtotal  | 171.00   | c1.                                       | Subto                                      | otal  | 0.00  |                      |        |
|          | Utilit   | Standards: housing and utilities ies Standards; non-mortgage ex ilable at www.usdoj.gov/ust/ or   | penses for the app   | olical                                    | ole cou                                    | nty and household size. (   |   |                      | 447.00 |
|          | Local Standards: housing and utilities; mortgage/rent expense. Enter, in Line a below, the amount of the IRS Housing and Utilities Standards; mortgage/rent expense for your county and household size (this information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter on Line b total of the Average Monthly Payments for any debts secured by your home, as stated in Line 42; subtract Line b from Line a and enter the result in Line 20B. Do not enter an amount less than zero.  a. IRS Housing and Utilities Standards; mortgage/rental 1,781.00  b. Average Monthly Payment for any debts secured by your 3400.00  if any, as stated in Line 42   |   |  |   |  | 0.00  |   |                      |        |
|          | c.   | Net mortgage/rental expense   |  |   |  | Subtract Line b from Li   | ne a  |                      |        |
|          | Local Standards: housing and utilities; adjustment. If you contend that the process set out in Lines 20A 20B does not accurately compute the allowance to which you are entitled under the IRS Housing and Utilities Standards, enter any additional amount to which you contend you are entitled, and state the basis for your contention in the space below:  Local Standards: transportation; vehicle operation/public transportation expense. You are entitled to an expense allowance in this category regardless of whether you pay the expenses of operating a vehicle and regardless of whether you use public transportation.  Check the number of vehicles for which you pay the operating expenses or for which the operating expenses are included as a contribution to your household expenses in Line 8.  Description 1 Description 2 Descript |   |  |   |  | -   |   |                      |        |
|          |  |   |  |   |  | ļ   |   |                      |        |
|          |  |   |  |   |  | 230.00  |   |                      |        |
| <b>)</b> | exper<br>additi<br>amou  | Standards: transportation; addinses for a vehicle and also use placed in the standards of the bankruptcy court.)  | ublic transportation exp   | on, a<br>oense                            | nd you<br>s, ente                          | contend that you are enti<br>r on Line 22B the "Publi   | itled to an c Transport   |                      | 0      |

|          | which   | Local Standards: transportation ownership/lease expense; Vehicle 1. Check the number of vehicles for which you claim an ownership/lease expense. (You may not claim an ownership/lease expense for more than two vehicles.)   |   |           |          |  |  |
|----------|---|---|---|-----------|----------|--|--|
|          | $\boxtimes$   | 2 or more.  |   |           |          |  |  |
| <b>t</b> | Enter<br>(avail<br>Avera  | Enter, in Line a below, the "Ownership Costs" for "One Car" from the IRS Local Standards: Transportation (available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court); enter in Line b the total of the Average Monthly Payments for any debts secured by Vehicle 1, as stated in Line 42; subtract Line b from Line a and enter the result in Line 23. Do not enter an amount less than zero. |   |           |          |  |  |
|          | a. IRS Transportation Standards, Ownership Costs 489.00   |   |   |           |          |  |  |
|          | b.  | Average Monthly Payment for any debts secured by as stated in Line 42   | 690.00  |           |          |  |  |
|          | c.  | Net ownership/lease expense for Vehicle 1   | Subtract Line b from Line a   |           |          |  |  |
|          | check   | Standards: transportation ownership/lease expense; Vehicle ted the "2 or more" Box in Line 23.  |   |           |          |  |  |
| 4        | (avail  | , in Line a below, the "Ownership Costs" for "One Car" from able at www.usdoi.gov/ust/ or from the clerk of the bankrup age Monthly Payments for any debts secured by Vehicle 2, as and enter the result in Line 24. Do not enter an amount less  | tcv court); enter in Line b the tot<br>s stated in Line 42; subtract Line | al of the |          |  |  |
|          | a.  | IRS Transportation Standards, Ownership Costs   |   |           |          |  |  |
|          | b.  | Average Monthly Payments for any debts secured by as stated in Line 42  |   | i         |          |  |  |
|          | c.  | Net ownership/lease expense for Vehicle 2   | Subtract Line b from Line a   |           |          |  |  |
|          | _C  | Net ownership/lease expense for vehicle 2   | Subtract Line o from Line a   | l         |          |  |  |
|          | Other Necessary Expenses; taxes. Enter the total average monthly expenses that you actually incur for all federal, state and local taxes, other than real estate and sales taxes, such as income taxes, self employment taxes social security taxes, and Medicare taxes. Do not include real estate or sales taxes.   |   |   |           |          |  |  |
|          | Other Necessary Expenses: involuntary deductions for employment. Enter the total average monthly payroll deductions that are required for your employment, such as retirement contributions, union dues, and uniform costs. Do not include discretionary amounts, such as voluntary 401(k) contributions.   |   |   |           |          |  |  |
| 9.7      | Other Necessary Expenses: life insurance. Enter total average monthly premiums that you actually pay for term life insurance for yourself. Do not include premiums for insurance on your dependents, for whole life or for any other form of insurance.   |   |   |           |          |  |  |
|          | аге ге  | Necessary Expenses: court-ordered payments. Enter the tot quired to pay pursuant to court order, such as spousal or chi ents on past due support obligations included in Line 44.   |   | ude       | 1,776.00 |  |  |
| 70       | Other Necessary Expenses: education for employment or for a physically or mentally challenged child. Enter the total monthly amount that you actually expend for education that is a condition of employment and for education that is required for a physically or mentally challenged dependent child for whom no public education providing similar services is available. |   |   |           |          |  |  |
| 30       | on childcare - such as baby-sitting, day care, nursery and preschool. Do not include other educational  |   |   |           |          |  |  |
|          | payments.  Other Necessary Expenses: health care. Finter the total average monthly amount that you actually expend  |   |   |           |          |  |  |
|          | Other Necessary Expenses: health care. Enter the total average monthly amount that you actually expend on health care expenses that is required for the health and welfare of yourself or your dependents and that is reimbursed by insurance or paid by a health savings account. Do not include payments for health insurance or health savings accounts listed in Line 34. |   |   |           |          |  |  |
|          | Other Necessary Expenses: telecommunication services. Enter the average monthly amount  |   |   |           |          |  |  |
|          |   | or your health and welfare or that of your dependents. Do no  |   |           | 33.00    |  |  |
|          | Total   | Expenses Allowed under IRS Standards. Enter the total of I  | ines 19 through 32.   |           | 5,556.46 |  |  |
|          |   |   |   |           |          |  |  |

|                                       | Healt   | Subject B: Additional Expense Note: Do not include any expense h Insurance, Disability Insurance and Health Savings   |  |                                |      |
|---------------------------------------|---|---|--|--------------------------------|------|
|                                       | exper   | ur dependents.  |  |                                |      |
|                                       | a.  | Health Insurance  |  |                                |      |
|                                       | b.  | Disability Insurance  |  |                                |      |
| 34                                    | c.  | Health Savings Account  |  |                                | 0.00 |
| · · · · · · · · · · · · · · · · · · · | If you  | and enter on Line 34 a do not actually expend this total amount, state your abelow:   | actual total average monthly expe  | enditures in the               |      |
| 8                                     | mont<br>elder   | nued contributions to the care of household or family hly expenses that you will continue to pay for the reastly, chronically ill, or disabled member of your househe to pay for such expenses.   | sonable and necessary care and si  | upport of an                   |      |
| <b>36</b>                             | Protection against family violence. Enter the total average reasonably necessary monthly expenses that you actually incurred to maintain the safety of your family under the Family Violence Prevention and Services Act or other applicable federal law. The nature of these expenses is required to be kept confidential by the court.  |   |  |                                |      |
| 30                                    | Home energy costs. Enter the total average monthly amount, in excess of the allowance specified by IRS  Local Standards for Housing and Utilities, that you actually expend for home energy costs. You must provide your case trustee with documentation of your actual expenses, and you must demonstrate that the additional amount claimed is reasonable and necessary.  |   |  |                                |      |
|                                       | you a<br>secor<br>with  | ation expenses for dependent children less than 18. Excually incur, not to exceed \$137.50 per child, for attendary school by your dependent children less than 18 documentation of your actual expenses, and you must nable and necessary and not already accounted for in | endance at a private or public ele<br>years of age. You must provide y<br>explain why the amount claimed | mentary or<br>our case trustee |      |
| 31                                    | Additional food and clothing expense. Enter the total average monthly amount by which your food and clothing expenses exceed the combined allowances for food and clothing (apparel and services) in the IRS National Standards, not to exceed 5% of those combined allowances. (This information is available at www.usdoj.gov/ust/ or from the clerk of the bankruptcy court.) You must demonstrate that the additional amount claimed is reasonable and necessary. |   |  |                                |      |
| 40                                    |   | nued charitable contributions. Enter the amount that you financial instruments to a charitable organization as  |  | L.                             | 0    |
| 41                                    | Total   | Additional Expense Deductions under § 707(b). Enter   | er the total of Lines 34 through 4   | 0                              | 0.00 |

|   | The state of the state of the state of  | Salpan (C:- Redicement)  |  |  |          |
|---|---|--|--|--|----------|
| you o<br>Paym<br>total<br>filing  | re payments of secured claims. For each of your debts that is secured by an interest in property that own, list the name of the creditor, identify the property securing the debt, and state the Average Monthly nent, and check whether the payment includes taxes or insurance. The Average Monthly Payment is the of all amounts scheduled as contractually due to each Secured Creditor in the 60 months following the gof the bankruptcy case, divided by 60. If necessary, list additional entries on a separate page. Enter otal of the Average Monthly Payments on Line 42. |  |  |  |          |
|   | Name of<br>Creditor   | Property Securing the Debt   | Average<br>Monthly<br>Payment          | Does payment include taxes or insurance? | 4099.00  |
| a.  | GMAC  | home   | 3,400.00                               | ⊠ yes □ no                               |          |
| b.  |   | Car  | 699.00                                 | ☐ yes ☒ no                               |          |
| c.  |   |  |  | yes no                                   |          |
|   |   |  | Total: Add<br>Lines a, b and           |  |          |
| page.   | Name of Creditor  | Property Securing the Debt   | ······································ | ne Cure Amount                           |          |
| a.  |   |  |  |  |          |
| b.  |   |  |  |  |          |
| c.  |   |  |  |  |          |
|   |   |  | Total: Add                             | Lines a, b, and c                        |          |
| as pri  | iority tax, child support and   | claims. Enter the total amount, d<br>alimony claims, for which you v<br>igations, such as those set out in | vere liable at the                     |  |          |
| Chapter 13 administrative expenses. If you are eligible to file a case under Chapter 13, complete the following chart, multiply the amount in line a by the amount in line b, and enter the resulting administrative expense. |   |  |  |  |          |
| a.  | Projected average monthly   | Chapter 13 plan payment.   |  |  |          |
| b.  | Current multiplier for your district as determined under rules issued by the Executive Office for United States (This information is available at www.usdoj.gov/ust/ or the clerk of the bankruptcy court.)   |  |  |  |          |
| c.  | Average monthly administrates   | rative expense of Chapter 13   | Total: Multiply a and b                | y Lines                                  |          |
| Total   | Deductions for Debt Payme   | ent. Enter the total of Lines 42 th  | rough 45.                              |  | 4,099.00 |
|   |   | Subpar D. Fold Belagio   |  |  |          |
| Total   | l of all deductions allowed u   | nder § 707(b)(2). Enter the total  | of Lines 33, 41,                       | and 46.                                  | 9,655.46 |

| PROCEST DETERMINATION OF \$7000000 PROSSMOUTION  |   |  |  |  |  |
|--|---|--|--|--|--|
| nter the amount from Line 18 (Current monthly income for § 707(b)(2))  | 7,631.00  |  |  |  |  |
|  | 9,655.46  |  |  |  |  |
| Ionthly disposable income under § 707(b)(2). Subtract Line 49 from Line 48 and enter the result.   | -2024.46  |  |  |  |  |
|  | -121,467.60   |  |  |  |  |
|  | of page 1   |  |  |  |  |
|  |   |  |  |  |  |
| The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the remainder of Part VI (through 55).   | Lines 53  |  |  |  |  |
| nter the amount of your total non-priority unsecured debt  |   |  |  |  |  |
| hreshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result.  | 0.00  |  |  |  |  |
| Secondary presumption determination. Check the applicable box and proceed as directed.  The amount on Line 51 is less than the amount on Line 54. Check the ox for "The presumption does not arise" at the top of page 1 of this statement, and complete the verification in Part VIII.  |   |  |  |  |  |
| The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumption arises" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also complete Part VIII.   |   |  |  |  |  |
| Par vii: addinglys, Bivese Cadas   |   |  |  |  |  |
| Other Expenses. List and describe any monthly expenses, not otherwise stated in this form, that are required for the health and welfare of you and your family and that you contend should be an additional deduction from your current monthly income under § 707(b)(2)(A)(ii)(I). If necessary, list additional sources on a separate page. All figures should a flect your average monthly expense for each item. Total the expenses. |   |  |  |  |  |
| Expense Description Monthly Amount   |   |  |  |  |  |
| A  | _   |  |  |  |  |
| ).   | _   |  |  |  |  |
| 2.   | _   |  |  |  |  |
| Total: Add Lines a, b, and c   |   |  |  |  |  |
|  | The amount set forth on Line 51 is more than \$10,950. Check the box for "The presumption arises" at the tapage 1 of this statement, and complete the verification in Part VIII. You may also complete Part VII. Do not the remainder of Part VI.  The amount on Line 51 is at least \$6,575, but not more than \$10,950. Complete the remainder of Part VI (through 55).  Enter the amount of your total non-priority unsecured debt  Threshold debt payment amount. Multiply the amount in Line 53 by the number 0.25 and enter the result.  Secondary presumption determination. Check the applicable box and proceed as directed.  The amount on Line 51 is less than the amount on Line 54. Check the ox for "The presumption does not are the top of page 1 of this statement, and complete the verification in Part VIII.  The amount on Line 51 is equal to or greater than the amount on Line 54. Check the box for "The presumptineses" at the top of page 1 of this statement, and complete the verification in Part VIII. You may also comparises at the top of page 1 of this statement, and complete the verification in Part VIII. You may also comparises at the top of page 1 of this statement, and complete the verification in Part VIII. You may also comparises at the top of page 1 of this statement, and complete the verification in Part VIII. You may also comparises at the top of page 1 of this statement, and complete the verification in Part VIII. You may also comparises at the top of page 1 of this statement, and complete the verification in Part VIII. You may also comparises at the top of page 1 of this statement, and complete the verification in Part VIII. You may also comparises at the top of page 1 of this statement, and complete the verification in Part VIII.  Entity (1) |  |  |  |  |

|    |                     |  | Para NED PROPERTIES                  |   |
|----|---------------------|--|--------------------------------------|---|
| 57 | I declar<br>both de | re under penalty of perjury that the btors must sign.) | information provided in this stateme | nt is true and correct. (If this is a joint case, |
|    | Date:               | 1/8/09   | Signature:                           | Ug  |
|    | Date:               |  | Signature:                           |   |

## Eastern District of Virginia, Alexandria Division

| e: | Grady, Christopher  | Case No.   |   |
|----|---|--|---|
|    | Debtor  |  | (if known)  |
|    |   | Chapter  | 7   |
|    | DECLARATION AND   | SIGNATURE OF NON-ATT   | CORNEY  |
|    |   | TON PREPARER (See 11 U.S   |   |
|    | I declare under penalty of perjury that: (1) in 11 U.S.C. § 110; (2) I prepared the accomparand have provided the debtor with a copy of the by 11 U.S.C. §§ 110(b), 110(h), and 342(b); and pursuant to 11 U.S.C. § 110(h) setting a maxim petition preparers, I have given the debtor notic document for filing for a debtor or accepting an | document(s) listed below<br>document(s) and the attached r<br>d (3) if rules or guidelines have<br>arm fee for services chargeable t<br>e of the maximum amount before | for compensation notice as required been promulgated by bankruptcy re preparing any |
|    | Accompanying documents:  Petition   | Printed or Typed Name a<br>Bankruptcy Petition Prep  |   |
|    | Schedules   | LawyerAlternative,llc.   |   |
| •  | Matrix Attachments  | Social-Security No. of Be<br>Preparer (Required by 11  |   |
|    |   | _548-83-9605   |   |
|    | If the bankruptcy petition preparer is not an inc   |  |   |
|    | and social-security number of the officer, princ this document.   |  |   |
|    | and social-security number of the officer, princ  |  |   |

Names and Social Security numbers of all other individuals who prepared or assisted in preparing this document, unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional signed sheets conforming to the appropriate Official Form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of Title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

### NOTICE TO DEBTOR BY NON-ATTORNEY BANKRUPTCY PETITION PREPARER

[Must be filed with any document(s) prepared by a bankruptcy petition preparer.]

I am a bankruptcy petition preparer. I am not an attorney and may not practice law or give legal advice. Before preparing any document for filing as defined in § 110(a)(2) of the Bankrupty Code or accepting any fees, I am required by law to provide you with this notice concerning bankruptcy petition preparers. Under the law, § 110 of the Bankruptcy Code (11 U.S.C. § 110), I am forbidden to offer you any legal advice, including advice about any of the following:

- \* whether to file a petition under the Bankruptcy Code (11 U.S.C. § 101 et seq.);
- \* whether commencing a case under chapter 7, 11, 12, or 13 is appropriate;
- \* whether your debts will be eliminated or discharged in a case under the Bankruptcy Code;
- \* whether you will be able to retain your home, car, or other property after commencing a case under the Bankruptcy Code;
- \* the tax consequences of a case brought under the Bankruptcy Code;
- \* the dischargeability of tax claims;
- \* whether you may or should promise to repay debts to a creditor or enter into a reaffirmation agreement with a creditor to reaffirm a debt;
- \* how to characterize the nature of your interests in property of your debts; or
- \* bankruptcy procedures and rights.

[The notice may provide additional examples of legal advice that a bankruptcy petition preparer is not authorized to give.]

In addition, under 11 U.S.C. § 110(h), the Supreme Court or the Judicial Conference of the United States may promulgate rules or guidelines setting a maximum allowable fee chargeable by a bankruptcy petition preparer. As required by law, I have notified you of the maximum amount, if any, before preparing any document for filing or accepting any fee from you.

X Signature of Debtor Date Signature of Joint Debtor Date

[In a joint case, both spouses must sign.]

| Jocument | Page 56 of 62 |
|----------|---------------|

| In Re: | Grady, Christopher | Case No.   |  |
|--------|--------------------|------------|--|
| •      | Debtor             | (if known) |  |

|    | UNITED STATES BANKRUPTCY Eastern District of Virginia, Alexandria  |   |        |
|----|--|---|--------|
|    | DISCLOSURE OF COMPENSATION OF BANKRUPTCY   | PETITION PREP   | ARER   |
| 1. | Under 11 U.S.C. § 110(h), I declare under penalty of perjury that I am employee of an attorney, that I prepared or caused to be prepared one documents for filing by the above-named debtor(s) in connection with case, and that compensation paid to me within one year before the filing bankruptcy petition, or agreed to be paid to me, for services rendered debtor(s) in contemplation of or in connection with the bankruptcy can | or more<br>this bankruptcy<br>ng of the<br>on behalf of the |        |
|    | For document preparation services, I have agreed to accept   | \$  | 205.00 |
|    | Prior to the filing of this statement I have received  | \$  | 205.00 |
|    | Balance due  | \$  | 0.00   |
|    | Petition; accompanying documents  and provided the following services (itemize): document preparation  |   |        |
| 3. | The source of the compensation to be paid to me was:  Debtor(s)  Other (Specify: )   |   |        |
| 4. | The source of the compensation to be paid to me is:  Debtor(s)  Other (Specify: )  |   |        |
| 5. | The foregoing is a complete statement of any agreement or arrangeme me for preparation of the petition filed by the debtor(s) in this bankrup  |   |        |
| 6. | To my knowledge no other person has prepared for compensation a de in connection with this bankruptcy case except as listed below:  Name  Social   | ocument for filing  Security Number                         |        |
|    |  |   |        |

X /s/ J. Christian Barlow Signature of Bankruptcy Petition Preparer

07 January 2009 Date

# UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF VIRGINIA

| Alelxandria Division  |  |  |  |  |
|---|--|--|--|--|
| Inre Grady, Christopher   |  |  |  |  |
| Case No.  |  |  |  |  |
| Chapter   |  |  |  |  |
| Debtor(s)   |  |  |  |  |
| COVER SHEET FOR LIST OF CREDITORS   |  |  |  |  |
| I hereby certify under penalty of perjury that the master mailing list of creditors submitted either on computer diskette or by a typed hard copy in scannable format, with Request for Waiver attached, is a true, correct and complete listing to the best of my knowledge.   |  |  |  |  |
| I further acknowledge that (1) the accuracy and completeness in preparing the creditor listing are the shared responsibility of the debtor and the debtor's attorney, (2) the court will rely on the creditor listing for all mailings, and (3) that the various schedules and statements required by the Bankruptcy Rules are not used for mailing purposes. |  |  |  |  |
| Master mailing list of creditors submitted via:   |  |  |  |  |
| (a) $\sqrt{}$ computer diskette listing a total of $23$ creditors; or   |  |  |  |  |
| (b) scannable hard copy, with Request for Waiver attached, consisting of pages, listing a total of creditors  |  |  |  |  |
| M. A.   |  |  |  |  |
| Debtor  |  |  |  |  |
| Joint Debtor  |  |  |  |  |
| Date: 1/9/09 [Check if applicable] Creditor(s) with foreign addresses included on disk/hard copy.   |  |  |  |  |

[diskcs ver. R-1/2003]

# Eastern District of Virginia, Alexandria Division

| In Re: | Grady, Christopher                          | Case No.   |  |
|--------|---|--|--|
|        | Debtor                                      | (if known)   |  |
|        |   |  |  |
|        |   |  |  |
|        | VERIFICATIO:                                | N OF CREDITOR MATRIX                                   |  |
|        |   |  |  |
|        | The above named debtor(s), or debtor's      | attorney if applicable, do hereby certify under        |  |
|        | penalty of perjury that the attached Master | Mailing List of creditors, consisting of 3 sheet(s) is |  |
|        | complete, correct and consistent with the d | ebtor's schedules pursuant to Local Bankruptcy         |  |
|        | Rules and I/we assume all responsibility fo | r errors and omissions.                                |  |
|        |   |  |  |
|        |   |  |  |
|        |   |  |  |
|        |   |  |  |
|        | Date  | Signature of Attorney                                  |  |
|        |   | ~- <u>g</u>  |  |
|        | $\Delta I = \Delta I$                       |  |  |
|        | 1/4   |  |  |
|        | Signature of Debtor                         | Signature of Joint Debtor                              |  |
|        |   |  |  |
|        |   |  |  |
|        |   |  |  |
|        | Signature of Authorized Individual          |  |  |

# Eastern District of Virginia, Alexandria Division

| In Re:  | Grady, Christopher  | Case No.  |  |  |
|---|---------------------|---|--|--|
| _   | Debtor              | (if known)  |  |  |
| VERIFICATION OF MAILING LIST  |                     |   |  |  |
| The Debtor(s) certifies that the attached mailing list (only one option may be selected per form):  |                     |   |  |  |
| is the first mail matrix in this case.  adds entities not listed on previously filed mailing list(s).  changes or corrects name(s) and address(es) on previously filed mailing list(s).  deletes name(s) and address(es) on previously filed mailing list(s).  The above named Debtor(s) hereby verify that the attached list of creditors is true and correct. |                     |   |  |  |
|   |                     | e(s) and address(es) on previously filed mailing list(s). |  |  |
|   |                     | ress(es) on previously filed mailing list(s).             |  |  |
|   |                     |   |  |  |
|   |                     | 1/8/09  |  |  |
|   | Date                | Signature of Attorney                                     |  |  |
| MA  |                     |   |  |  |
|   | Signature of Debtor | Signature of Joint Debtor                                 |  |  |

Barclays Bank 125 S West St Wilmington DE 19801

CRD PRT ASSO ONE GALLERIA TOWER 13355 NOEL ROAD S Dallas TX 75240

Cash Transfer Centers Northway Broker Ltd Level 8 suite 3 Plaza Commercial Center, Bisazza Street Silema SLM15 Malta

Fair Collections and Out 12304 BALTIMORE AVE STE Beltsville MD 20705

Fidelity 82 Devonshire Street Boston MA 02109

Fidelity 82 Devonshire Street Boston MA 02109

Fidelity 82 Devonshire Street Boston MA 02109

First Premier\_Bank 601 S. Minnnesota Avenue Sioux Falls SD 57104

GMAC PO Box 4622 Waterloo IA 50704

GMAC PO Box 4622 Waterloo IA 50704

HFC PO Box 1547 Chesapeake VA 23327 HSBC Bank PO Box 5253 Carol Stream IL 60197

Harbor Park LP 11410 Esplanade Drive Reston VA 20194

**IRS** 

Merrick Bank PO Box 5000 Draper UT 84020

Northway Financial DBA Cash transfer Centers P.O. Box 1216 Oak, PA 19456

Reston Dental Arts 11503 Sunrise Valley Drive Reston VA 20191

Riggio Grady 22567 Armstrong Terrace #312 Ashburn, VA 20147

Sears PO Box 6189 souix Falls SD 57117

Target NB PO Box 673 Minneapolis MN 55440

Up Front Payday LLC 2274 south 1300 east Suite G-8-273 Salt Lake City, UT 84106

Washington Mutual /Providian PO Box 9180 PLEASANTON, CA 94566 Wells Fargo Auto Finance PO Box 29704 Phoenix AZ 85038